1935

City and County of Kingston upon Hull.

ANNUAL REPORT

UPON THE

HEALTH OF HULL

FOR THE YEAR 1935.

NICOLAS GEBBIE, M.D., D.P.M., D.P.H.,
Medical Officer of Health and
School Medical Officer.

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Medical Officer of Health.

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Health and Public Assistance Committee, 1934-35 —*Continued.*

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Staff of the Health Department, 1935.

Medical Officer of Health :
NICOLAS GEBBIE, M.D., D.P.M., D.P.H.

Deputy-Medical Officer of Health :
* R. RAINES, M.R.C.S., L.R.C.P. (Lond.), D.P.H.

Senior Assistant Medical Officers of Health :
J. MORRISON, M.C., M.A., M.D., D.P.H.
HELEN STANDRING, M.D., D.P.H.
D. A. CADMAN, M.B., Ch.B., D.P.H.
D. DIAMOND, M.R.C.S., L.R.C.P., D.P.H.

Medical Superintendent, Infectious Diseases Hospitals and Tuberculosis Sanatorium :
H. MASON LEETE, M.D., M.R.C.S., D.P.H.

Assistant Medical Officers of Health :
LILLIAS HARDIE, M.D.
ELIZABETH J. FINDLAY, M.B., Ch.B., D.P.H.
ALICE STEVEN, M.B., Ch.B.
J. R. PATERSON, M.B., Ch.B. (to 31st January, 1935).
H. M. COHEN, M.B., Ch.B., D.P.H. (to 30th November, 1935).
R. C. HOLDERNESS, M.B., B.S., D.P.H.
A. C. MORRISON, M.D., D.P.H. (to 20th October, 1935).
DORIS G. SHARVELLE, M.R.C.S., L.R.C.P., D.P.H. (from 4th March, 1935).
R. H. MOYES, M.B., Ch.B., D.P.H. (from 18th March, 1935).
W. F. LYLE, B.Sc., M.D., B.A.O., D.P.H. (from 8th July, 1935).

Infectious Diseases Hospitals and Tuberculosis Sanatorium :
Medical Superintendent : H. MASON LEETE, M.D.
Deputy Medical Superintendent : A. C. MORRISON, M.D., D.P.H. (from 21st October, 1935).
Resident Medical Officers, City Hospital : R. H. MOYES, M.B., Ch.B., D.P.H. (to 17th March, 1935).
F. J. H. CRAWFORD, M.D., B.Sc., D.P.H. (to 17th March, 1935).
G. A. W. NEILL, M.B., Ch.B., B.A.O. (from 22nd March, 1935).
EDITH E. CROMB, M.B., Ch.B., D.P.H. (from 1st May, 1935).
Resident Medical Officer, Tuberculosis Sanatorium : P. R. FANNING, M.B., Ch.B., B.A.O. (to 18th October, 1935).
Matron (Infectious Diseases Hospitals) : JULIA ARMSTRONG, A.R.R.C.

Tuberculosis Dispensaries.
Senior Tuberculosis Officer : D. DIAMOND, M.R.C.S.
Assistant Tuberculosis Officer : J. R. PATERSON, M.B. (to 31st January, 1935).
A. C. MORRISON, M.D. (from 1st February to 20th October, 1935).
5 Tuberculosis Nurses and a Male Health Visitor.

Maternity and Child Welfare.
Inspector of Midwives : HELEN STANDRING, M.D.
*Clinic Medical Officers : ADA JACKSON, M.B., Ch.B.
* JANET M. GIBSON, M.B., Ch.B.
* ELIZABETH McVICKER REDFERN, M.B., Ch.B.
Resident Medical Officer, Maternity Home : GWYNETH D. GRIFFITH, M.D., F.R.C.S.
Junior Resident Medical Officer.
Matron, Maternity Home : KATHLEEN V. CONI.
Assistant Inspector of Midwives : MABEL HARRISON.
26 Health Visitors, and a Dining Superintendent.

* Part-time Officers.

Staff of the Health Department, 1935—*Continued.*

Venereal Diseases.

*Medical Officers : E. HARRISON, M.A., M.D., F.R.C.S.
R. J. BARLEE, L.R.C.P.I. and L.M., L.R.C.S.I. and L.M.
*Pathologist : W. W. ADAMSON, M.Sc., M.B., M.R.C.P., D.P.H.

Public Assistance :

Anlaby Road Hospital and Institution :

Resident Medical Officer : D. L. MACRAE TOD, M.A., B.Sc., M.B., Ch.B.
3 Assistant Medical Officers.
Master and Matron : F. CULSHAW, M.B.E. and Mrs. CULSHAW (to 7th May, 1935).
Master : N. G. GUY (from 21st August, 1935).
Matron and Superintendent Nurse : Miss E. A. DOWSETT (from 8th May, 1935).

Beverley Road Hospital and Institution :

Medical Officer : D. V. MARSHALL, M.B., Ch.B.
2 Assistant Medical Officers.
Master : A. MARSHALL.
Matron and Superintendent Nurse : Miss T. FERGUSON.

Corporation Hospitals, Tuberculosis Sanatorium, Maternity and Child Welfare Clinics, etc. :

Part-time Medical Staff, etc. :

Ear, Nose and Throat Surgeons	2	Radiologists	2
Orthopædic Surgeons	2	Dental Surgeons	2
Visiting Surgeons	2	District Medical Officers (all of whom are Public Vaccinators)	10
Consulting Physician	1		

Food Inspection :

Veterinary Surgeon and Chief Food Inspector : H. P. LEWIS, M.R.C.V.S.
Assistant Veterinary Surgeon and Food Inspector : P. D. DUNN, M.R.C.V.S., F.Z.S.
Four Assistant Inspectors.

Sanitary :

Chief Sanitary Inspector : F. C. MARCHANT, M.R.San.I., M.S.I.A.
35 Assistant Inspectors.

Clerical :

Chief Clerk : W. MATANLE.
49 Clerks.†

SUMMARY :

Medical Staff (whole and part-time)	51
Veterinary Surgeons	2
Clerical	50
Male Inspectors	37
Health Visitors, T.B. Nurses, etc.	54
Teachers	2
Nursing Staff (indoor)	308
Male and Female Attendants	112
Domestic Staff	119
Scrubbers	174
Tradesmen (tailors, shoemakers, upholsterers, etc.)	13
Disinfecting and Ambulance Staffs, Hospital Porters, Gardeners, etc.	79
Remainder of Public Assistance Institutional Staff (whole and part-time)	30
	1031

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* Part-time Officers.
† Including staff at Institutions, Hospitals, etc.

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STATISTICAL SUMMARY AND INTRODUCTION.

Summary for 1935.

Area in Acres	14,433
Population at Census of 1931	313,544
Number of structurally separate occupied dwelling-houses in the City at Census of 1931	74,397
Average number of persons in each inhabited building at Census of 1931	4.2
Number of families or separate occupiers at Census of 1931	77,939

	1935.	1934.
Estimated Population in July	322,200	319,600
Estimated number of inhabited houses (at 31st March, 1936 and 1935)	86,606	83,852
Number of births 1935—*Legitimate*: Male, 2,945; Female, 2,705; Total, 5,650. *Illegitimate births*: Male, 144; Female, 133; Total, 277.	5,927	5,859
Birth-rate per 1,000 of the population	18·4*	18·3
Number of Deaths	3,912	3,644
Crude death-rate (deaths per 1,000 of the population)	12·2*	11·4
Adjusted death-rate	13·4†	12·5†
Natural increase of the population during the year	2,015	2,215
Number of deaths of infants (under the age of one year): *Legitimate*, 402; *Illegitimate*, 26; Total	428	375
Infant Mortality per 1,000 births: *Legitimate*, 71; *Illegitimate*, 94; Rate	72	64
Number of Deaths under the age of one month	173	173
Neo-Natal Mortality per 1,000 births	29·2	29·5
Number of women dying in, or in consequence of, Child-birth: Sepsis, 5; Other Causes, 10; Total	15	30
Deaths from Influenza	18	20
Deaths from Pneumonia and Bronchitis	373	337
Deaths from Measles	28	3
Deaths from Whooping Cough	27	14
Deaths from Diarrhœa and Enteritis (under two years of age)	77	46
Death-rate from the seven principal zymotic diseases: Smallpox, Whooping Cough, Measles, Diphtheria, Diarrhœa, Scarlet Fever and "Fever" (Typhoid, Enteric and Typhus), per 1,000 of the population	0·59	0·47
Death-rate from Diarrhœa and Enteritis of children under two years per 1,000 births	13·0	7·8

*In the births and deaths for 1935 are included those that occurred in the old area during the 3 months immediately preceding the extension of the City on the 1st of April of that year. Therefore, whilst the population of the area of the City as constituted at the end of 1935 was 322,200, the annual birth and death-rates for the same year have, at the request of the Registrar-General, been calculated on an adjusted population of 321,325 to make allowance for the change of area.

†Calculated by multiplying the crude death-rates (deaths per 1000 of the population) of 12·2 and 11·4 by the Registrar General's comparability factor of 1·10, to make it comparable from the mortality point of view with the crude death rate of the country as a whole or with the mortality of any other local area similarly modified by its own factor for the purpose. For explanatory note hereon, see page 26.

Summary for 1935—*Continued.*

	1935.	1934.
Death-rate from Phthisis per 1,000 of the population	0·7	0·8
Death-rate from all forms of Tuberculosis per 1,000 of the population	0·9	0·9
Death-rate from Cancer per 1,000 of the population	1·5	1·4

The rateable value of the City at 31st March, 1936 and 1935 respectively,	£1,740,270	£1,708,299
Average rate in the £ (excluding Water Charges)..	19/4	18/2
Sum represented by a 1d. General Rate	£7,190	£7,013
Average yield of a 1d. General Rate (after taking into account the differential rating in the added areas and deducting cost of collection)	£6,514	£6,369

The expenditure of the Health Department during the Financial Year ended 31st March, 1936, was as under :—

	Gross. £	Income. £	Net. £
General Health, Maternity and Child Welfare, and Hospital Services	141,726	18,500	123,226
Sanitary Section (not including the cost of Refuse Collection and Disposal)	35,754	6,770	28,984
Public Assistance :—			
Institutional Relief	133,728	25,255	108,473
Out Relief—Ambulance Service and Drugs and Medical Appliances	4,984	8	4,976
TOTAL	£316,192	50,533	265,659

This expenditure represents a net charge on the ratepayers of 3/4·8d. in the £. The gross cost per head of the population is 19/8d. and the net cost 16/6d.

GUILDHALL,

HULL, July, 1936.

My Lord Mayor, Ladies and Gentlemen,

I have the honour to present to you my report upon the health, sanitary circumstances and vital statistics of the City of Hull for the year 1935.

Following my practice of previous years, I have incorporated in this volume the Annual Report of the School Medical Officer, which is addressed more particularly to the Chairman and Members of the Education Committee. Thus, in the joint report is furnished a record of the steps taken by the various Committees of the City Council to maintain a high standard of individual and communal health amongst our citizens of all ages.

It is pleasing to record that the amelioration in the general economic position referred to in last year's report, has fortunately been continued throughout 1935. The extent of the improvement can be measured by reference to the statistics of unemployment. The average number of men registered as unemployed in the city in one week of each month was 14,003 in 1935, as compared with 15,049 in 1934.

The birth-rate per 1,000 of the population in 1935 was 18·4. For each of the last 10 years, and at 10-yearly intervals since 1895, it shows a slow but steady decline until 1933, when the rate, namely, 17·9 per 1,000 of the population, was the lowest on record. The rates for the two succeeding years show an increase over that for 1933 of 0·4 and 0·5 respectively.

As regards the death-rate per 1,000 of the population, in 1935 it was 12·2, an increase of 0·8 over the rate for 1934, which, at 11·4 per 1,000, was the lowest on record for the city.

The infantile mortality rate, that is, the number of deaths of infants under 1 year of age per 1,000 births, was 72 in 1935, as against 64 in 1934 and 77 in 1933.

Very gratifying, however, is it to note that the number of women dying in or in consequence of childbirth has fallen from 33 in 1933 and 30 in 1934 to 15 in 1935.

For the second year in succession the tuberculosis rate was below 1 per 1,000 of the population, the rate for 1935 being 0·95 as compared with 0·92 in 1934.

As far as the incidence of infectious disease is concerned, a fact worthy of mention is that no case of enteric fever was notified in the city during 1935. Thus, for the first time on record, the city has been free from this disease for a period of one year.

During 1935 diphtheria was slightly less prevalent and somewhat less severe in type than in recent years, but the occurrence of cases of the "gravis" type of this disease still gives cause for anxiety. I cannot emphasise too strongly the imperative need for all parents who have young children to take advantage without hesitation of the facilities which have been provided for Schick testing and immunisation. In 1935 the number of cases of diphtheria notified was 956, as compared with 1,076 in 1934, and the number of deaths from this disease fell from 65 in 1934 to 34 in 1935.

Satisfactory progress has been made during the year under review in the building of the combined clinic in Ellerburn Avenue which, when opened in 1936 for Maternity and Child Welfare and School Medical purposes, will serve the needs of the large and recently developed residential district in North Hull.

I would again take the opportunity to thank the Chairman and Members of the Committees concerned, the Chief Officials of the Corporation, and all the members of the Staff of the Department for their valuable co-operation with the Medical Officer of Health in his efforts to secure and maintain for the city's inhabitants a healthy life in a healthy environment.

I have the honour to be,

Your obedient Servant,

N. GEBBIE,

Medical Officer of Health and
School Medical Officer.

GENERAL AND SOCIAL CONDITIONS AFFECTING THE AREA.

NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Meteorology. Meteorological records are kept by the General Superintendent of Parks at a Climatological Station in Pearson Park. Readings are taken twice daily, at 9 a.m. and 9 p.m. Hull has a lower rainfall than most parts of England, and in 1935, it was again low, being 26·05 inches. It was, however, 4·75 inches above the figure for the previous year. There were 1,502 hours of bright sunshine, compared with 1,390 in 1934, or an addition of 112 hours in the year under review. The number of days on which rain fell was 159, there were 304 sunny and 61 sunless days. The prevailing wind was from the west.

Particulars of the meteorological readings will be found in Appendix 1, pages 161 and 162.

Population. At the Census taken on the 26th April, 1931, the number of persons enumerated in the City was 313,544 (152,632 males and 160,912 females), as against 290,681 in 1921.

It is interesting to note that Hull now ranks on a population basis as the eighth town in England and Wales.

The increase of 22,863 persons in the City was 7·9 per cent. of the 1921 population and compares with the intercensal increase of 4·8 per cent. in the East Riding and 2·8 per cent. in the North Riding of Yorkshire, and with 5·5 per cent. for England and Wales.

Included in the above intercensal increase of 22,863, however, is the population of 7,466 persons added on the extension of the City on the 1st April, 1930.

Another factor to be considered in connection with the intercensal increase is that whilst the 1931 Census took place on the 26th April, that taken in 1921 was on the 19th June, when the populations of the holiday resorts were swollen by temporary visitors and the populations of other areas, including Hull, correspondingly reduced. Consequently, the increase in 1931, as compared with 1921, is undoubtedly larger than would have been the case in normal circumstances.

The following return shows the Census populations of Hull and of England and Wales from 1841, and the intercensal periods since then.

POPULATION OF HULL.

Year of Census.	Hull.		England and Wales.	
	Population.	Intercensal increase per cent.	Population.	Intercensal increase per cent.
1841	67,308		15,914,148	—
1851	84,690	25·8	17,927,609	12·65
1861	97,661	15·3	20,066,224	11·90
1871	121,892	24·7	22,712,266	13·21
1881	165,974	36·2	25,974,439	14·36
1891	*200,472	20·8	29,002,525	11·65
1901	†240,259	19·8	32,527,843	12·17
1911	277,991	15·7	36,070,492	10·89
1921	290,681	4·6	37,886,699	4·93
1931	‡313,544	7·9	39,947,931	5·5

Extensions of boundary and added population (in brackets) in *1882 (12,376), †1897 (350), ‡1930 (7,600).

The following table brings up to date the information relating to population supplied last year.

POPULATION OF HULL.

	Registrar General's Estimated Population, July.	Natural Increase during preceding year.	Insured Persons 31st December.	Average number of Parliamentary Voters.	Number on elementary school roll last week before Christmas holidays.
1925	297,300	2,659	111,173	144,843	46,911
1926	294,600	2,553	113,080	145,773	46,977
1927	296,600	2,584	113,310	147,128	47,234
1928	297,600	2,300	116,031	148,684	47,037
1929	299,900	2,303	115,452	185,783	46,705
1930	311,800	1,540	118,092	187,313	47,395
1931	315,200	2,455	120,321	188,728	48,171
1932	318,200	1,872	121,565	189,298	49,926
1933	319,900	1,554	120,868	187,266	49,844
1934	319,600	2,215	120,611	186,977	48,721
1935	322,200	2,015	121,159	186,470	48,098

* Extension of city boundary in 1935, added population, 2,600.

STATE OF EMPLOYMENT AND AMOUNT OF POOR RELIEF.

Unemployment. The Manager of the Employment Exchange has kindly furnished me with information which shows that unemployment, as recorded by his Department, was less prevalent in Hull in 1935 than in 1934. The average number of persons registered as unemployed in one week of each month during 1935 was 16,531, compared with an average of 17,631 in 1934. The average number of unemployed men was 14,003 in 1935, compared with 15,049 in 1934. The numbers of women and juveniles in 1935 were 1,676 and 852 respectively, against 1,682 and 900 in the previous year. The " peak " period in 1935 was in January, when the total was 19,119 ; the highest number in 1934 was in February, when the total was 19,822 ; the highest total in 1933 was in January, when it was 22,154. The lowest total in each of the last three years was 15,012, December, 1935 ; 16,255, August, 1934 ; and 16,480, December, 1933.

Poor Relief. The number of persons in receipt of poor relief on the 28th December, 1935, was 23,567 ; 1,650 were receiving institutional and 21,917 domiciliary relief.

The average number of persons in receipt of relief per 10,000 of the population during the last quarter of the year was 737 ; that considerably more relief was required in Hull than in other places is shown by the corresponding figures for England and Wales (333) and County Boroughs (465).

VITAL STATISTICS.

VITAL STATISTICS.

Marriages. The number of marriages solemnised in the City was 3,114, compared with 2,988 during 1934, and 2,815 in 1933. The marriage rate was 19·4 per 1,000 of the population, as against 18·7 in 1934, and 17·6 in 1933.

Births. The births registered numbered 5,927; this includes the births of the children of Hull parents which occurred at the Municipal Maternity Home or at places outside the City, and excludes those of children born of mothers who were resident in Hull only temporarily. The 5,927 births are equal to a birth-rate of 18·4 per 1,000 of the population, which compares with 18·3 in 1934, and 17·9 in 1933. The birth-rate for the previous 5 years (1930–34) was 19·0. The birth-rate for England and Wales was: 1935, 14·7; 1934, 14·8; or a decrease of 0·1. The Hull rate for 1935 was 0·1 above that for 1934.

Of the total births in Hull, 3,089 were of males, 2,838 of females. The births were spread over the year as follows:—

1st quarter.	2nd quarter.	3rd quarter.	4th quarter.	Total
1,369	1,588	1,574	1,396	5,927

The sub-joined figures show the number of births and the birth-rates for each of the last 10 years and at 10-yearly intervals from 1895.

Year.	*No. of Births.*	*Birth-rate.*
1935	5,927	18·4
1934	5,859	18·3
1933	5,740	17·9
1932	6,108	19·2
1931	6,040	19·2
1930	6,288	20·6
1929	6,090	20·3
1928	6,103	20·5
1927	6,220	21·0
1926	6,360	21·6
1925	6,484	21·8
1915	7,230	24·8
1905	7,705	29·8
1895	7,340	33·8

From the above table it will be seen that the birth-rate shows a slow and steady decline until 1933, for which year the rate is the lowest on record. The rates for the two succeeding years, however, show an increase over that for 1933 of 0·4 and 0·5 respectively.

There were 277 illegitimate births; this is 4·7 per cent. of the total, compared with 4·7 per cent. in 1934 and 4·6 per cent. in 1933.

Deaths. There were 3,912 deaths, equal to a rate of 12·2 per 1,000, compared with 11·4 in 1934, and 13·1 in 1933. The death-rate of England and Wales was: 1935, 11·7; 1934, 11·8, and 1933, 12·3. The total deaths in Hull in 1935 was 268 more than in 1934. In 1935, however, there were, compared with 1934, decreases in the numbers registered in some of the causes of death, those principally concerned being diphtheria (31), violence, excluding suicide (14), and tuberculosis of the respiratory system (13). The causes mainly responsible for the increased total deaths in 1935 were: senility (98), diarrhœa (31), circulatory diseases, other than heart disease and aneurysm (30), acute and chronic nephritis (28), measles (25), bronchitis (23), and broncho-pneumonia (11).

The deaths recorded each quarter were :—

1st	2nd	3rd	4th	Total.
1,082	1060	807	963	3,912

The number of deaths from the seven principal zymotic diseases, which are small pox, measles, whooping cough, diphtheria, scarlet fever, diarrhœa and fever (including typhus, enteric and typhoid) was 184, or an increase of 35 on the total for 1934. From the table hereunder, it will be seen that in the period under review, there was a decline of 31 in the number of deaths from diphtheria, of 2 from scarlet fever, and of 1 from enteric fever, but an increase of 31 deaths from diarrhœa, of 25 from measles, and of 13 from whooping cough, compared with the mortality from the same causes in the year 1934. The zymotic rate for 1935 was 0·59 per 1,000 of the population, against 0·47 in 1934, and 0·72 in 1933.

	1935	1934
Smallpox	0	0
Enteric fever	1*	2
Measles	28	3
Scarlet fever	6	8
Whooping cough	27	14
Diphtheria	34	65
Diarrhœa and enteritis	88	57

*This death occurred outside the City, but as it had regard to a former Hull resident, it was allocated to this area.

The following statement shows the number of deaths and the death-rate for each of the last 10 years and 10-yearly intervals from 1895 :—

Year.	*No. of Deaths.*	*Death-rate.*
1935	3,912	12·2
1934	3,644	11·4
1933	4,186	13·1
1932	3,762	11·8
1931	4,168	13·2
1930	3,833	12·4
1929	4,550	15·2
1928	3,800	12·8
1927	3,920	13·2
1926	3,776	12·8
1925	3,931	13·2
1915	4,494	16·7
1905	4,152	16·0
1895	4,445	20·4

Full particulars as to the mortality amongst infants and children under 5 years of age appear in the Maternity and Child Welfare Section of this report. (*See* page 140).

Age Distribution. Only 1,623 deaths were of persons aged 65 years and upward ; there were 585 deaths under the age of 5 years ; 114 of school children, that is, between 5 and 15 years ; 150 of adolescents between 15 and 25 ; 415 died in the prime of life from 25 to 45 years, and 1,025 in middle life, from 45 to 65. When compared with the returns for the previous year, these figures show increases in 4 and decreases in 2 age periods. Increases : 65 years and upward, 144 ; under 5 years, 84 ; 45 to 65, 26 ; and 25 to 45, 24. Decreases : 5 to 15, 6 ; and 15 to 25, 4.

Ward Statistics. Appendix 2, page 163, gives the vital statistics for the whole City from 1930 to 1935, and Appendix 3, page 164, gives the *ward statistics* for 1935. It will be seen that the highest birth-rates were in University (36·6) and Southcoates (23·9) Wards, and the lowest in Newland (7·4) and Park (8·4) Wards. The highest death-rates were in University (17·0) and Paragon (16·0) Wards, and the lowest death-rates were in St. Andrews (8·3) and Stoneferry (9·5) Wards.

Appendix 4 (page 165) compares Hull's vital statistics for 1935 with those of England and Wales. Whilst the death-rate for Hull is higher by 1·7 per 1,000 of the population than that for England and Wales, it is gratifying to note that the birth-rate is 3·7 above that for the country as a whole.

Causes of Death. Appendix 5 (page 166) gives the principal causes of death, divided into certain age groups and into the wards where the deceased resided. Heart disease caused 790 deaths and cancer was responsible for 470, bronchitis and pneumonia 373, and tuberculosis 305 deaths. Cirrhosis of the liver, generally the result of alcoholism, was recorded as the cause of death in 12 instances. There were 37 suicides, and 108 deaths from other violence.

Male and Female Deaths. There were 2,093 deaths of males and 1,819 of females: the death-rate being 13·4 per 1,000 of the male population and 11·0 per 1,000 of the female population. The diseases with heavier incidence in males were heart disease (404 males, 386 females), cancer (239 males, 231 females), pneumonia (152 males, 119 females), tuberculosis of the lungs (146 males, 98 females), and congenital debility and malformations, etc. (126 males, and 75 females). On the other hand, the following diseases were more fatal to females than to males: senility (152 females, 99 males), cerebral hæmorrhage (113 females, 89 males), and whooping cough (20 females and 7 males).

COMPARATIVE STATISTICS.

The following table compares the vital statistics of Hull with those of England and Wales, the aggregate figure for the 121 Great Towns, and the individual figures of the 17 largest towns.

	Estimated Resident Population Mid. 1935.	Birth-Rate per 1,000.	Crude Death-Rate per 1,000.	Adjusted Death-Rate.	Infant Mortality per 1,000 births.
England and Wales	40,645,000	14·7	11·7		57
121 Great Towns	20,860,650	14·8	11·8		62
London	4,185,200	13·3	11·4	11·7	58
Birmingham	1,013,700	15·4	10·9	12·0	64
Liverpool	854,500	20·0	13·2	15·2	83
Manchester	748,100	14·5	12·9	14·7	71
Sheffield	520,500	14·7	11·9	13·1	52
Leeds	487,200	14·8	13·2	14·1	64
Bristol	413,100	13·8	10·8	10·6	43
HULL	**322,200**	**18·4**	**12·2**	**13·4**	**72**
Newcastle	292,700	16·0	12·6	14·2	86
Bradford	292,200	13·5	14·3	14·3	64
Nottingham	280,200	15·7	12·5	12·9	81
Stoke	274,100	16·6	12·3	15·0	83
West Ham	270,700	15·5	16·7	12·3	45
Leicester	261,000	13·9	11·6	11·8	59
Portsmouth	250,200	14·8	11·8	11·7	46
Cardiff	221,400	15·2	12·3	13·0	59
Salford	210,000	15·0	13·0	17·3	78

It will be seen from the foregoing comparisons that in 5 towns the infantile mortality is above that for Hull, whilst in 7 towns the adjusted death-rate at all ages is higher than that for the Third Port. Liverpool is again the only town in the table that has a higher birth-rate.

Death-rates. It should be noted that the local death-rates for 1931 and subsequent years have been adjusted by multiplying the crude death-rate (deaths per 1,000 of the population) by the Registrar General's comparability factor of 1·10.

In connection with this adjustment the Registrar General points out that the average mortality rates experienced in England and Wales during the years 1930 to 1932 divided into 11 sex age-groups have been adopted as the standard and have been applied to the corresponding sex age-groups in the 1931 Census population of every Borough, Urban and Rural District in the country. The adjusting factor supplied in respect of a given area represents the ratio of the resulting death-rate for the national 1931 Census population to the similarly obtained hypothetical death-rate of the said area. The factor may be said to represent the population handicap to be applied to the area, and when multiplied by the crude death-rate experienced in the area, modifies the latter so as to make it comparable with the crude death-rate for the country as a whole as with the similarly adjusted death-rate for any other area.

HOSPITAL AND
HEALTH SERVICES.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Hospital Accommodation. The total hospital beds available in and outside the City for Hull people is 3,380, and includes those at General and Special Hospitals, and in Public Assistance, Maternity, Tuberculosis, Fever and Mental Hospitals. (*See* Appendix 8, page 170).

In connection with the scheme for the provision of additional accommodation at the City Hospital (where the number of beds available at the end of 1935 was 215), the City Architect was instructed to prepare plans for 1 cubicle block of 10 beds, 2 cubicle blocks of 12 beds each, and a pavilion incorporating an operating theatre, sterilising rooms, 4 cubicles, etc. It is hoped progress will be made with these buildings during 1936.

The new 38-bed pavilion at the Tuberculosis Sanatorium, Cottingham, was completed towards the end of the year, but not available for use until January, 1936, thereby increasing the number of patient beds at the Sanatorium for that year to 161.

As the first step in the Corporation's scheme for the provision of a new Municipal General Hospital, 68½ acres of land were purchased at Skidby on the outskirts of the City. This site is in close proximity to that of the City Hospital and the Tuberculosis Sanatorium as well as to that of the City Mental Hospital.

Out-patients' Attendances. The attendances during 1935 numbered 190,777 at the Hull Royal Infirmary, 51,641 at the Victoria Hospital for Sick Children, and 82,085 at the three general dispensaries.

Insurance Medical Service. The approximate number of insured persons entitled to medical benefit was, on the 1st January, 1935, 121,159, of whom 1,748 were deposit contributors and 119,411 members of approved societies, and included members of the Navy and Army Fund. The number of persons on the lists of panel doctors was 114,461, and those on the list of the Hull Friendly Societies' Medical Institution, 1,727. The number of prescriptions issued was 579,308, at an average cost per prescription of 9·1d.

Clinics. Particulars of Clinic and Treatment Centres in the area will be found in Appendix 6 (pages 167 and 168).

Chemical and Bacteriological Laboratories. The analytical work of the department, as of all the other Corporation departments, is carried out by the City Analyst, A. R. Tankard, Esq., F.I.C., at the City Laboratories. Mr. Tankard is also responsible for the bacteriological work of the Corporation, except the V.D. work and that requiring a vivisection licence.

Mr. Tankard issues an annual report containing details of the work done in his laboratory, and I need not therefore give particulars here; let it suffice to say that during 1935, 2,592 chemical analyses of foods and drugs and 7,216 bacteriological examinations (including pathological specimens, 6,737; milks and miscellaneous samples, 479) were made by him and his staff.

Local Legislation. No additions were made during the year 1935 to the enactments, bye-laws and regulations, apart from the general law, which apply to the city.

PUBLIC ASSISTANCE.

The Anlaby Road and the Beverley Road Institutions, transferred to the City Council under the provisions of the Local Government Act, 1929, are administered by the Medical Officer of Health.

Appendix 10 contains reports submitted by the Senior Medical Officers which show the number of patients and types of disease treated at the two hospitals throughout the year, and furnish detailed information supplied by the Masters regarding the Institutions.

The demand for hospital treatment continues to increase. The public, generally, evince a greater appreciation of the hospital facilities provided for them.

As in previous years, accommodation at the Institution Hospitals has been available to members subscribing to the funds of the Hull Voluntary Hospitals Council, and the year under review has again shown an increase in the number of their members admitted to such hospitals.

The accommodation at the hospitals has been fully taxed throughout the year, and steps are being taken to provide additional and more adequate hospital facilities.

Ambulance facilities, entirely separate from those provided for the removal of cases to the Infectious Diseases Hospital, are utilised for Public Assistance hospital work. The Corporation hearse is used for all funerals from both the Anlaby Road and the Beverley Road Institutions, and for funerals arranged by the Relieving Officers.

Casuals. The Beverley Road Institution is now the only Institution in the City admitting casuals.

The average nightly number of casuals occupying beds in the casual wards at the Beverley Road Institution throughout the year was 32. During the year 4,378 casuals were admitted to these wards, compared with 4,422 in 1934, and 5,058 in 1933. Details of the monthly admissions of casuals to this institution are given in Appendix 9 on page 172. In 1935, 92 casuals were transferred to the " house " and 75 to the hospital.

The City Council are represented on the Yorkshire Casual Poor Assistance Authority.

Anlaby Road Institution—House. This Institution will accommodate 210 men and 169 women. The number of persons in the house on the 1st January, 1935, was 180, and on the 31st December, 1935, 177. New admissions to the Institution during the year numbered 110, compared with 120 and 110 in 1934 and 1933 respectively. Detailed particulars of the admissions month by month will be found in Appendix 9 on page 171. The daily average number of inmates in the House in 1935 was 181, and the aggregate number of days during which they were resident there was 66,291.)

The Corporation was responsible for the burial of 93 persons who died in the Institution during 1935.

On the 7th May, 1935, Mr. and Mrs. F. Culshaw, who had been Master and Matron of the Institution since 1914, retired from these positions. Mr. N. G. Guy, was appointed Steward and Master, and Miss E. A. Dowsett, Matron and Superintendent Nurse.

Anlaby Road Institution—Hospital. The number of beds available at this Hospital during 1935 was 545.

It will be seen from Appendix 10 (page 173) that the admissions to this hospital in 1935 numbered 3,619, compared with 3,264 for the previous year; 1,107 operations (766 major and 341 minor) were carried out during the year, 155 more than in 1934, when the number was 952. The daily average number of patients in the Hospital in 1935 was 519, and the aggregate number of days during which the beds were occupied was 189,813.

The patients admitted for treatment are largely medical, surgical and gynaecological. In addition, however, there are two wards assigned for chronic cases of pulmonary tuberculosis; also cases of infectious diseases, such as measles, chicken-pox, whooping cough, mumps, pemphigus and erysipelas have been treated. Owing to the congestion and lack of separate ward units, the isolation of infectious cases is always a very difficult problem. Considerable overcrowding, particularly in the medical wards, both acute and chronic, and in the children's, accommodation is experienced during the early part of the year when illness is more prevalent.

The surgical work of the hospital has continued to increase, and the number of operations performed is considerably in excess of that in any previous year.

The general work of the hospital tends to become more specialised, and every year new methods of scientific investigation are adopted as a routine measure in many cases.

Throughout the year cases treated with radium were re-examined and carefully followed up. Patients were requested to attend periodically at the hospital for examination, and advice was given in each case. Where the symptoms indicated further treatment in hospital, re-admission was arranged. There are many satisfactory cases, particularly those suffering from rodent ulcer, carcinoma of the breast, and of the cervix of the uterus; a certain number appear to be completely cured by radium. Further, many advanced cases have obtained temporary relief from unpleasant symptoms. Frequently, surgical methods and radium treatment are combined. During 1935, 31 new cases were treated, and records were kept as to the condition at varying intervals of the 92 cases now on the register; 189 re-examinations took place, and there were 27 re-admissions for further treatment.

The greater part of the radium is the property of the Hull Radium Trust, and the scheme for interchange of supplies between this hospital and the Hull Royal Infirmary has worked satisfactorily.

Diabetic Clinic. On the 8th November, 1935, a weekly clinic for diabetics was commenced at the Anlaby Road Institution Hospital. Patients referred to the clinic have been limited to persons suffering from diabetes who are in receipt of medical out relief. Fortunately, the services of Dr. D. R. Muir have been available as the consultant in charge of the clinic, and the specialised work undertaken thereat has been much appreciated by the District Medical Officers and by the patients themselves.

From the 8th November to the 31st December, 104 attendances have been made by the 21 patients referred to the clinic for treatment.

Beverley Road Institution—House (including Margaret Street Nursery). The certified accommodation at this Institution is for 300 men, 175 women, and 30 children, total 505; but the actual number of beds available on the 31st December, 1935, was 479—men, 301; women, 142, and children 36. On the 1st January, 1935, there were 411 persons, excluding casuals, in the Institution, and on the

31st December, 1935, 418 persons were accommodated. There were 512 new admissions to the Institution in 1935, compared with 650 in 1934, and 877 in 1933. During 1935, 41 persons were admitted from the areas of other Local Authorities. Forty-three persons were transferred to other Institutions during the year. The number of persons in the Patrington Institution for whose maintenance this Authority was responsible, was 6 on the 1st January, 1935, and 3 on the 31st December, 1935. Detailed particulars of the admissions, month by month, to the Institution are to be found in Appendix 9 on page 172. The daily average number of inmates in the House in 1935 was 369, and the aggregate number of days during which they were resident there was 134,785.

During the year, 69 burials took place from the Beverley Road Institution at the expense of the Corporation.

Beverley Road Institution—Hospital. The number of beds available at the hospital during 1935 was 400.

The number of admissions during the year was 3,747, compared with 3,118 for the previous year ; 741 operations (420 major and 321 minor) were performed, compared with a total of 538 during 1934. The daily average number of patients in the Hospital was 415, and the aggregate number of days during which the beds were occupied was 152,469.

During the first half of the year, the accommodation at this hospital was insufficient to provide satisfactorily for the large number of patients admitted. The daily average number of patients throughout the year was 415, 15 more than the number of beds allocated to the hospital, and on March 26th, there were actually 487 patients receiving treatment in the hospital.

Nine hundred and eighty-three children were admitted during the year as compared with 693 in the previous year ; the prevalence of measles and whooping cough was the chief cause of this increase. Throughout the whole of the year it was necessary to maintain a special ward for cases of whooping cough

District Medical Officers and Medical Out-Relief. There are 10 District Medical Officers in the city for medical out relief duties. Dr. A. M. Millar resigned his position as District Medical Officer and his services terminated on the 31st December, 1934. Dr. M. McLeod was appointed to the vacancy and commenced duty on the 1st January, 1935.

SUMMARY OF RETURNS FROM DISTRICT MEDICAL OFFICERS.

Number of visits to Public Assistance Patients at their homes.	Number of attendances of Public Assistance Patients at surgery.	Number of cases recommended for hospital treatment.	Number of Deaths certified in respect of persons receiving Medical Out-Relief.
8,202	42,681	854	92

The dispensing of prescriptions for medical out-relief patients is provided as follows :—4 District Medical Officers send their prescriptions to the dispensaries attached to 2 Relief Stations ; two other District Medical Officers dispense their own medicines, the drugs being supplied by the Corporation. In the remaining 4 districts the dispensing is undertaken by private chemists—in 2 instances under contract and in the remaining 2 cases under National Health Insurance rates.

Surgical Appliances, Spectacles, Dentures, &c. The provision of surgical appliances, spectacles, dentures, &c., is included in the scheme of interavailability of the clinic services, and in this way a more satisfactory method of supplying these various requirements is in operation.

Hereunder are particulars of the applications for appliances, &c., dealt with during the year 1935 :—

Surgical Boots, Splints, Calipers, &c.	46
Spectacles, Artificial Eyes, &c.	327
Dentures	245
Trusses, Belts, Elastic Bandages, &c.	48
Artificial Legs	4
Other Appliances	17
	687

In addition, repairs were, in a number of cases, effected to spectacles, dentures, surgical appliances, &c., and the Committee also granted payment of part cost of dentures, &c., the remainder of the cost being provided, in most instances, by the Society from which the applicant was entitled to benefit.

SANITATION.

SANITARY CIRCUMSTANCES OF THE AREA.

Water. The City Water Engineer informs me :—

The water supply of the city is obtained from deep wells sunk into the chalk strata at three pumping stations ; these stations are all within a 6 mile radius of the city and are situated at Springhead, Cottingham and Dunswell.

About 13 miles of new mains have been laid in the City during the year.

The approximate number of dwelling houses in the City is 86,606 ; these, with one or two exceptions, are supplied directly from the Corporation's mains.

The average number of gallons consumed per head per day during 1935 was 33·9 for all purposes, the domestic and unmetered trade supply being 22·6.

The water is analysed by the City Analyst and Bacteriologist for the Water Department every quarter.

Sampling of Water. Two samples of water were taken from a pump at premises at which there was a supply of water other than that provided by the Corporation. The City Analyst and Bacteriologist, to whom the samples were submitted for chemical and bacteriological examination, reported that they were not of satisfactory purity. The owners complied with a request that the use of the pump should be discontinued, and that the provision of an adequate supply of pure water should be obtained from the Corporation's mains. Respecting the case which had not been satisfactorily dealt with at the end of 1934, the owners have since removed the pump and provided an adequate supply of water from the mains.

Drainage and Sewerage. The following particulars are submitted from information supplied by the City Engineer :—

The scheme for the new deep main outfall sewer for West Hull is well advanced and negotiations are now proceeding with adjoining authorities.

Having regard to the new housing estate at Bilton Grange and the development anticipated in view of the street improvements to be undertaken in this area, a new outfall sewer is to be constructed for East Hull, and application is being made to the Ministry of Health respecting the first instalment of the work.

The systematic reconstruction of old sewers continues.

The installation of the new pump at the West District Pumping Station is almost completed, and extensive repairs to one of the old pumps is already in hand.

Watercourses and Streams, etc. Informal notices were served in a number of cases where watercourses (ditches) were found to be so choked or silted up as to mpede the proper flow of water. The persons concerned took the necessary steps o remove the obstructions. The condition of the water in one of the principal watercourses (a wide, open drain) in the City was the cause of a number of complaints being received. The Authority concerned was communicated with and arrangements were made for the drain to be sluiced with tidal water from the River Hull. The work of sluicing was carried out during the months of August and September with considerable improvement to the condition of the water in he drain. Later on in the year the water was again found to be in a bad condition. Heavy rains, however, were responsible for an increased volume of clean water oming down the drain from outside the City boundary, resulting in the removal of the offensive matter. At the end of the year the water was clear and free from nuisance.

Public Cleansing. The Collection and Disposal of Refuse, Street Cleansing, nd the maintenance of Public Lavatories in the City are under the control of the Director of Public Cleansing, by whom the following particulars have been urnished :—

Refuse Collection and Disposal. During 1935 a total of 73,279 tons of house nd trade refuse were collected, namely, dry refuse, 73,070 and waste paper, 209.

37,928 tons of dry refuse (or 52 per cent.) were disposed of by separation and ncineration at the Refuse Disposal Plant, and 35,142 tons (or 48 per cent.) at tips.

In addition to the above, 686 tons (1,454 loads) of refuse were delivered to he Refuse Disposal Plant by private traders, and 3,131 tons (3,131 loads) to the ps.

The waste paper was baled and sold to waste paper merchants.

Street Cleansing. No important changes have been made in the system of reet cleansing during the year under review.

Public Lavatories and Urinals. There are 6 Public Lavatories and 43 Urinals n the City. It is hoped in the near future to erect further accommodation to meet he needs of the suburban districts.

Disinfecting Station. The following figures show the work carried out by the staff attached to the Disinfecting Station, Scarborough Street, during the past 5 years :—

Year.	No. of attendances of persons for baths and disinfection of clothing.			No. of articles disinfected.	No. of books disinfected.	No. of premises disinfected.
	School Children.	Others.	Total.			
1935	3,355	1,408	4,763	87,432	2,240	2,342
1934	3,295	1,393	4,688	86,300	1 759	2,521
1933	3,036	1,542	4,578	87,929	1,656	2,728
1932	4,561	1,986	6,547	111,193	1,840	2,818
1931	3,652	1,723	5,375	87,572	1,592	2,244

Of the school children treated at the Disinfecting Station during 1935, 8 were verminous and were sent for cleansing. The remainder received treatment for scabies.

1,408 other persons attended, 1,102 were suffering from scabies, 225 were verminous and 7 had been in contact with infectious disease ; 74 midwives and home helps received baths and had their clothing, etc., disinfected prior to attending further confinements.

CLOSET ACCOMMODATION AND PRIVY CONVERSIONS.

Particulars of the scheme for converting sanitary conveniences into water-closets were given in the report for the year 1933.

During the year 1935, 2 conveniences were converted into water-closets by owners, in pursuance of notices served under the Public Health Acts Amendment Act, 1907 ; and 2 notices served under that Act were withdrawn as the buildings to which they related were demolished.

As indicated in the above-mentioned report, a comparatively small number of sanitary conveniences have not been dealt with owing to difficulties connected with sewerage, water supply, etc.

The following are the approximate numbers of water closets and privies and pail closets in the City at the end of the year :—

Water-closets	97,337
Privies and Pail Closets	103

Sanitary Inspection of District. The total number of inspections carried out by the Chief Sanitary Inspector and his staff was 26,439, in addition to which 15,694 re-visits were made. Further, 719 houses were inspected under the Housing Acts, 1925-30, and 3,689 re-inspections were made to ascertain whether the works specified in the informal notices served in respect of 652 dwelling-houses had been carried out.

Particulars as to the inspections made, etc., are given in Appendix II (page 177).

During the year, 8,526 informal and 1,261 statutory notices with regard to the abatement of nuisances, etc., were served, compared with 8,130 informal and 954 statutory notices served in 1934. At the end of the year, 2,003 notices (1,491 informal and 512 statutory) were not complied with. The notices outstanding at the end of 1934 were complied with in the year under review.

Information with regard to the various Acts, etc., under which the 1,261 statutory notices were served, together with the number of such notices complied with during the year is set out hereunder :—

Served under :—	No. of Notices served.	No. complied with (including those served in previous years and complied with in 1935).	No. not complied with at end of 1935.
Public Health Act, 1875—			
Sec. 94 (Nuisances)	553	494	146
Sec. 36 (Watercloset)	—	—	—
Public Health (Smoke Abatement) Act, 1926	—	—	—
Public Health Act, 1925—			
Sec. 20 (Courts, etc.)	552	528	334
Sec. 54 (Water Course)	—	24	—
Kingston upon Hull Corporation Act, 1903—			
Sec. 50 (Fall-spouts)	—	—	—
Sec. 57 (Dust-bins)	74	79	12
Sec. 78 (Drainage)	13	13	—
ublic Health Acts Amendment Act, 1907—Sec. 25 (Yards)	69	58	20
yelaws—			
Houses let in Lodgings	—	—	—
Manure-pits, etc.	—	—	—
	1261	1196	512

The 522 statutory notices served under Section 20 of the Public Health Act, 925, were in respect of 65 courts and passages which were not formed, flagged, asphalted or paved as to allow of the effectual drainage of the subsoil or surface. Included in the 528 notices complied with (referring to 70 courts and passages), were 148 (60 courts and passages) in respect of which the works were carried out by the owners concerned. The works required by the remaining 380 notices (10 courts and passages) were, in default of the owners, executed by the Corporation.

In addition to the above, 270 informal notices, served in connection with 56 courts and 88 passages, were complied with.

Legal proceedings were instituted in 11 cases in connection with notices served under the Public Health Act, 1875, for the abatement of nuisances. In 9 of such cases the persons responsible had taken the necessary steps to comply with the notices before the date of hearing. In one of the two remaining cases the defendant was fined £2 and costs and an Order was made for the necessary work to be carried out in 7 days. An Order in the other case required the work to be executed in 14 days. The first Order was complied with within the time specified. The other Order not having been complied with, further proceedings were taken, when the defendant was fined £2 11s. 6d. The work under this Order was subsequently carried out.

In one instance it was necessary verbally to caution the person concerned with regard to liquid discharge at a temperature higher than 110° Fahrenheit being allowed to enter the sewer in contravention of Section 17 of the Public Health Acts Amendment Act, 1890. Verbal cautions had also to be given on three occasions with regard to petroleum spirit being permitted to enter sewers in contravention of Section 41 of the Public Health Act, 1925.

Smoke Abatement. During the year the number of observations (each of half-an-hour's duration) by the Smoke Inspectors, in respect of smoke emission, etc., was 2,969; 1,081 inspections were made of the premises concerned.

An analysis of the 2,969 observations shows that in 2,808 instances smoke was emitted during the half hour observations, but not in sufficient quantity to be regarded as a nuisance. In 161 cases smoke (100 black and 61 dense) was emitted for varying periods. Of the 100 black smoke emissions, 91 were for periods under two minutes and 9 for periods over two minutes during the half hour observation. With regard to the 61 dense smoke (other than black), 44 were for periods under two minutes, and 17 for periods over two minutes. During the whole of the observations recorded it was found that dense smoke was emitted for 265 minutes, the average emission being five seconds per half-hour's observation, this figure being the same as that for the previous year.

The number of warning letters sent in the more serious cases was 53 (including 10 follow-up letters); verbal cautions were given by the inspectors in 148 instances.

In no case was it necessary to serve a statutory notice.

Altogether 191 nuisances were abated during the year.

As the result of representations by the inspectors, 63 improvements were made to furnace equipment, etc., in order properly to control smoke emission; this figure includes five cases in which new boilers were installed, and 22 in which chimneys were heightened.

Deposits of Soot. The City Analyst has examined monthly throughout the year the contents of two atmospheric pollution gauges placed (1) in the garden at the rear of Kingston Almshouses, Beverley Road; (2) in the grounds of the Northern Cemetery. The detailed results will be published in the City Analyst's Annual Report. The total deposit of solid matters (soluble and insoluble) shown by the two gauges was as follows:—

	Tons per Square Mile per Month.		
	Maximum.	*Minimum.*	*Total for Year.*
Kingston Almshouses, Beverley Road ..	39·3 (November)	15·8 (December)	305
Northern Cemetery	18·8 (June)	7·3 (February)	166

The total deposit for the Central Gauge of 305 tons for the year compares with 329 tons per square mile in 1933, and 319 tons in 1932.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYE-LAWS OR REGULATIONS.

Offensive Trades. The following is a list of the trades classified as offensive in the City, and the numbers of registered premises at the end of 1934 and 1935 respectively:

	1934.	1935.
Blood Drier	—	—
Leather Dresser, Tanner; Fellmonger	2	2
Fat Melter or Fat Extractor	10	8
Glue Maker; Size Maker	—	—
Gut Scraper or Gut Cleaner	2	2
Manufacture of Manure from Fish, Fish Offal, Blood or other putrescible animal matter—Fish Manure Works	4	4
Fish Oil Manufacturer	5	5
Bone Boiler	5	5
Soap Boiler	4	4
Blood Albumen Maker		—
Animal Charcoal Manufacturer		—
Tripe Boiler	5	6
Fish Curer	55	53
	92	89

One Ammoniacal Liquor Works is kept under observation, and one Knacker's Yard is also regularly visited by Inspectors of the Health Department.

During the year the Corporation have given consent to the establishment of the undermentioned offensive trades :—

Soap Boiler	1
Tripe Boiler	1

The consent authorised the carrying on of the businesses until the end of the year.

There are now 21 offensive trades in respect of which the consent given by the Corporation covers a period of one year.

Applications were received for consent to establish the undermentioned trades :

Glue Maker	1
Bone Boiler	1
Fat Melter	1
Tripe Boiler	1
Fish Oil Extractor	1

The Corporation have notified the responsible parties that they will be prepared to give consent to the establishment of the trades, provided the Authority's requirements are satisfied.

The name of one fish curer has been removed from the register as his premises have been demolished, whilst the names of two fat melters, one soap boiler and one fish curer have also been deleted, as the trades have not been carried on at the several premises for six months, and the Corporation's consent has thereby been determined.

All the premises used for the purposes of offensive trades are subjected to systematic day and night observations. During 1935 the Offensive Trades Inspectors made 3,263 day and 681 night observations or inspections of these premises and other places from which effluvium nuisances might arise.

104 informal notices were served regarding contraventions of the bye-laws, and at the end of the year, these notices, and one outstanding at the end of 1934, had been complied with.

Pig Keeping. The number of premises registered as complying with the City Bye-laws was 246, provided with 734 sties, of which 2,211 inspections were made during the year. There were 24 contraventions regarding which informal notices were addressed to the persons concerned; 24 contraventions, including 6 not dealt with at the end of 1934 were remedied.

Included in the notices outstanding at the end of 1934 are 4 in respect of premises which came into the City owing to the extension which took place on the 1st April.

Removal of Offensive or Noxious Matter or Liquid. In addition to verbal cautions in 3 cases, it was necessary to draw the attention of 2 firms to their contravention of the Bye-laws with respect to the removal of offensive or noxious matter through the streets of the City during prohibited hours; the firms concerned took immediate steps to comply with the requirements of the Bye-laws.

Common Lodging Houses. At the end of the year there were 14 registered Common Lodging Houses in the City, as against 15 at the end of the previous year, containing 165 bedrooms or cubicles, with accommodation for 593 lodgers.

Three houses are provided with cubicles, and there is accommodation at one house for 2 married couples.

During the year 837 day and 76 night visits were made. Contraventions of the Byelaws were found in 189 instances, most of which were of a minor character; 15 letters and 29 notices were sent and 188 verbal cautions were given to the persons concerned.

At the end of the year the requirements of the Byelaws had been carried out in all but 4 of the above cases, and in relation to these steps had been taken by the persons concerned with a view to compliance by them with the provisions of such Byelaws.

Seamen's Lodging Houses. There were 17 of these houses on the register at the end of 1935 compared with 20 at the end of the previous year. Included in the 17 houses above-mentioned is the Victoria Mansions, Gt. Passage Street, which provides accommodation for 490 men, and the Sailors' Home, Alfred Gelder Street, providing accommodation for 30 men. The sleeping places at the latter premises consist of single cubicles. At these premises there is also a large room with accommodation for 6 men which is used solely for men from shipwrecked vessels. The other 15 houses contain 54 bedrooms, and provide accommodation for 176 seamen.

The total number of visits paid during the year was 873 (799 day and 74 night). During the year 78 contraventions of the Byelaws were found in connection with which 20 letters were sent and 75 verbal cautions were given to the persons concerned. At the end of the year all the matters except 6 had received attention.

In addition to the above, visits were paid to premises where it was thought that seamen might be lodged. In 3 instances it was found that persons were letting lodgings to seamen without being licensed. Verbal warnings were given and in two cases applications were subsequently made for licences; in the other case the person concerned ceased to lodge seamen. It was not found necessary to institute legal proceedings during the year.

Houses Let-in-Lodgings. During the year there was a further increase in the number of houses let-in-lodgings registered under the Byelaws, the total being 450, compared with 407 at the end of 1934. There were 97 new registrations, but 54 houses previously registered were taken off the register, owing to the demolition of properties in connection with slum clearance, and to other houses being closed. It is anticipated that the number of houses let-in-lodgings which will come within the provisions of the Byelaws will continue to increase. Informal circulars have been completed by the occupiers in respect of 37 houses let-in-lodgings, but the examination of these had not been completed at the end of the year. In addition, there are a number of houses remaining to be visited prior to informal circulars being sent to the occupiers.

The 450 registered houses let-in-lodgings contained 2,387 rooms, of which 378 unfurnished and 260 furnished were used for sleeping purposes only; and 812 unfurnished and 937 furnished were used for sleeping and living purposes.

The total number of visits paid to houses let-in-lodgings was 4,926; these include 1,100 visits to houses exempt from registration and 132 night visits to registered houses; 766 notices were served and 75 verbal cautions were given with regard to infringements of the Byelaws; 860 notices (including 167 reported as outstanding at the end of 1934) were complied with. It was not necessary to institute legal proceedings during the year.

Reference in another section of this Report has been made to the inspection of houses in which accommodation had been provided for lodgers during the continuance of the Hull Fair.

Detailed information as to the inspections made and defects, etc., found at houses let-in-lodgings, is to be found in Appendix 12 (pages 178 and 179).

Factory and Workshop Acts. At the end of the year there were 1,234 workshops and 115 workplaces on the register, compared with 1,212 workshops and 113 workplaces last year; 2,404 inspections, including 496 re-inspections, were made of factories, workshops and workplaces, and 290 contraventions were found. The infringements mainly comprised failure to carry out the periodical cleansing, neglect to forward lists of outworkers at the prescribed times, and unsatisfactory means of escape in case of fire; 260 notices were served, and 261 were complied with during the year, the latter number including notices outstanding at the end of 1934.

H.M. Inspector of Factories forwarded to this Authority 9 notices regarding various defects which required attention at factories and workshops. (See Appendix 13, page 184). He was notified of 42 factories and workshops, in which either protected persons were employed or the abstract was not affixed.

Five additional water-closets were provided at premises where the existing accommodation was insufficient; 4 additional water-closets were installed at buildings where separate sanitary conveniences were required; 9 unsuitable water-closets were put into a satisfactory condition, and 3 water-closets were provided in lieu of 2 unsuitable water-closets.

Bakehouses are dealt with in the section relating to "Food."

Outworkers. There were 261 persons (122 males and 139 females), principally engaged in net braiding and tailoring, employed as outworkers. The employers numbered 97. Appendix 13, pages 180 to 183, gives the details required by the Home Office.

Means of Escape in Case of Fire. Additional means of escape in case of fire were found to be required at 3 factories. The escapes were provided at two of the factories, whilst in the remaining instance an additional fire escape is being installed. The means of escape from fire were found not to be in order at 69 premises, but at the close of the year 47 places had been brought into conformity with the Authority's requirements. One certificate has been issued regarding means of escape in case of fire.

New Factories and Workshops, etc. 23 out of 73 plans submitted for examination did not satisfy the Authority's requirements with respect to means of escape in case of fire and or sanitary accommodation. In these instances the owners and or architects were notified, either verbally or by letter, of the works required to be done to put the buildings into conformity with the requirements.

Rag Flock Acts. 12 samples of rag flock were obtained, all of which complied with the standard of cleanliness fixed by the Rag Flock Acts, 1911 and 1928.

Shops Acts. At the beginning of the year there came into operation the Shops Act, 1934, a measure much wider in scope than the statutes hitherto affecting shops. Provision is therein made for a reduction in the number of working hours of young persons, as well as for the keeping of records as to their hours of employment. Further, the Act requires the occupier to affix in his shop a notice stating that the female assistants employed are intended to make use, whenever possible, of the seats provided for them. The Act also provides that there shall be available, for the health and comfort of shop assistants—(1) facilities for taking meals on the premises; (2) washing facilities; (3) adequate lighting, ventilation and warming of shops; and (4) sanitary conveniences.

For the purpose of enforcing the requirements, one of the two Shops Inspectors was designated Senior Shops Inspector; a District Sanitary Inspector was appointed a Shops Inspector, and three other District Sanitary Inspectors were, in addition to their ordinary duties, deputed to carry out the provisions relating to temperature, ventilation and sanitary conveniences in shops.

There are 7,614 shops on the register, in which 5,178 males and 4,783 females are employed; 1,438 shops were inspected, 722 of which were found not to be in conformity with the provisions of the Acts; and 1,013 re-visits were made for the purpose of securing compliance with the requirements. 15,401 night observations were also made of shops to ensure that they were not kept open after the statutory closing hours, and that young persons were not employed for more than the maximum number of working hours.

798 notices were served respecting the infringements discovered, and at the end of the year 566 notices embracing 1,376 of the contraventions which had occurred at 565 of the shops had been complied with.

Statistical information relating to contraventions, the numbers of different classes of shops, etc., is given in Appendix 14, pages 186 and 187.

Three prosecutions were instituted; one, for selling after the closing hour; another for failing to keep, in the prescribed form, records of employment of young persons, whilst the remaining case was in respect of the employment of young persons during prohibited hours.

During the year, 10 certificates were granted, exempting shops from the provisions of the Shops Act, 1934, as to sanitary conveniences and/or washing facilities.

Six additional water-closets have been installed at shops where separate sanitary accommodation was not available, and one additional water-closet has been provided where the accommodation was insufficient.

Plans for Shops. 49 plans affecting 67 shops were submitted for examination; 13 were found not to be satisfactory, and in these cases the owners and/or architects were notified, either verbally or by letter, of the works necessary to bring the buildings into conformity with the requirements.

Cinemas and Theatres. The Workshops, etc. Inspectors made 66 inspections of cinemas and theatres, which were found to be in a satisfactory condition.

Three plans affecting 6 cinemas were examined ; 2 of the plans were not satisfactory, as, in one case, the means of ventilation were insufficient, whilst in the other, the lobbies of the water-closets were not properly ventilated. The Architects and the Corporation Committee responsible for licensing places of public entertainment, were notified of the defects.

Fabrics (Misdescription) Act. No samples were taken, as the Inspectors could not find any premises where declared non-inflammable materials were being sold.

Canal Boats. The report of the Canal Boats Inspector is printed as Appendix 15 (pages 188 and 189). Visits of inspection numbered 925 ; at the end of the year particulars of 921 canal boats were on the local register.

Tents, Vans and Sheds. During the year 2 applications were received and approval was given in 1 instance for the land to be used by 4 vans. Eight applications were received from occupiers to place or keep vans on land ; permission to do so was granted in 6 instances. During the year 2 approved lands ceased to be used for occupation by vans. The number of vans on the 6 approved sites at the end of the year was 14, occupied by 22 adults (males 15, females 7), and 16 children (males 8 and females 8). Periodical visits were made by the Inspectors, but on no occasion was it necessary to draw the attention of owners or occupiers to any contravention of the Byelaws.

Rent and Mortgage Interest (Restrictions) Acts, 1920, 1923 *and* 1933. During the year 2 applications were made in respect of dwelling houses not kept in a reasonable state of repair. In each case a certificate was issued ; the landlords subsequently carried out the required repairs.

Hull Fair. There were 249 vans, 6 booths and 3 tents on or near the Fair Ground, occupied by 584 adults and 154 children. A total of 1,548 visits were paid to the vans, etc., by the Sanitary Inspectors, and enquiries made as to the health of the occupants. No case of infectious disease or overcrowding was discovered during the period of the Fair, but on the day after the termination of the Fair a case of scarlet fever was reported at a living van on the Fair Ground. The patient, a child of 3 years, was removed to the City Hospital and the van and its contents were disinfected the same day.

The permanent sanitary accommodation (contained in one building) consists of 11 water-closets and a 13-stall urinal for the use of males, and 13 water-closets for the use of females. Washing accommodation in the form of wash-hand basins with hot and cold water is provided in the same building. It was found that during peak periods, *i.e.*, after 8 p.m., the urinal accommodation was barely sufficient, and on one occasion it was seriously overtaxed. It is hoped that in the future this may be overcome by the provision of accommodation of a temporary character in suitable positions in the Fair Ground.

The accommodation provided for the use of females was found to be sufficient.

In addition to the above-mentioned accommodation, temporary sanitary conveniences consisting of 11 pail closets (6 for males and 5 for females) were provided by the Public Cleansing Department for the use of van dwellers in the Fair Ground, and 5 carts were provided for the reception of refuse. The conveniences and carts were disinfected daily after the removal of the contents. The closets were maintained in good order, and the pails were found to be of sufficient capacity. Arrangements were made by the Public Cleansing Department for the removal of the whole of the refuse (including street sweepings, etc.) by 11 a.m. each day.

The lodging house inspectors visited 948 houses in the streets adjacent to the Fair Ground and found 54 houses in which lodgers were being taken—112 males, 22 females and 2 children (males). No infringements of the Byelaws were discovered, the houses were well conducted and clean and there was ample accommodation for lodgers. Night visits were paid to the 54 houses and also to a number of other houses where it was considered likely that persons might be lodged. At one of the latter houses it was found that one lodger was being accommodated.

298 observations were made with regard to emissions of smoke, and 51 verbal cautions were given. Handbills drawing attention to the provisions of the Public Health (Smoke Abatement) Act, 1926, were distributed. There was a general improvement in connection with smoke abatement.

The Sampling Officer under the Food and Drugs (Adulteration) Act, 1928, took 8 samples of sweets, 5 of bread and butter, 1 of tea cake and butter and 7 of ice cream, the latter for bacteriological examination, in and within the vicinity of the Fair. All the samples of sweets, 4 of the samples of bread and butter, the sample of tea cake and butter, and 2 of the samples of ice cream were reported by the City Analyst to be satisfactory. In the case of the unsatisfactory sample of bread and butter, the Analyst reported that "the fat on the bread contained not less than 20 per cent. of fats other than butter-fat (Margarine)." Legal proceedings resulted in the vendor being fined 12s. 6d. With regard to the unsatisfactory samples of ice cream, special inspections were made of the various premises at which the ice cream had been manufactured, and in each case a letter of caution was sent to the manufacturer.

Rats and Mice Destruction. One rat-catcher is employed wholly upon this work, and labourers in the Sanitary Section assist him when necessary. The Authority's Sanitary Inspectors are appointed as officers under the Act of 1919, and they enquire into cases of rat infestation, and, where necessary, give advice as to the action to be taken.

During the year, 1,464 rats were destroyed. They were all brown rats and were killed by ferrets and dogs at the undermentioned types of properties:

	Rats Caught.
Business Premises (other than Shops), including Warehouses	279
Shops	394
Dwellings, including Outhouses	625
Other Lands and Premises	168

The number caught in 1934 was 2,641 and in 1933, 2,642.

During the year, 609 complaints, mostly from occupiers of dwelling-houses, were received of infestation of premises by rats. These were investigated by the Rat Officers, and information was given regarding methods of destroying rats. Where necessary, action was taken by the rat-catcher.

Informal communications were, in a number of instances, addressed to persons whose premises were rat-infested, requesting them to rid the premises of rats and to take steps to prevent further infestation.

Rat Week. During the week preceding National "Rat Week," a communication was addressed to the occupiers of a number of lands and premises which were known or thought likely to be infested by rats, requesting them to make a special effort to destroy the rodents. A copy of the bulletin entitled "Rats and How to Exterminate Them," issued by the Ministry of Agriculture and Fisheries, was sent to each of these persons.

The Director of Education circularised the head teachers of schools in the City and requested them to take such action as they considered desirable to draw the scholars' attention to the importance of rat destruction.

The Chief Librarian exhibited at the various public libraries in the City an illustrated poster designed by the Ministry for display during Rat Week.

An article concerning the Week was inserted in *Health News* (the Department's monthly magazine.)

Mosquito Control. An anti-mosquito campaign was carried out during the year on similar lines to those of previous years, and, as a precaution, spraying of open water was commenced in the early part of the year, before the presence of mosquito larvæ was demonstrated.

Notwithstanding the steps which had been taken, complaints were received with regard to the presence of mosquitoes in the northern area of the City. Arrangements were made for an intensive search of the whole of the area affected, although up to the end of June no living larvæ had been discovered in the usual breeding places. The search resulted in further new breeding places being found. These were immediately treated. Mosquito breeding was also found to be taking place in water butts, in gullies situated in open areas attached to dwelling houses, and in water containers on allotments. In these cases the occupiers carried out suggestions made by the Department. It was also found that breeding was taking place in a pond situated outside the City Boundary into which refuse was being tipped, and as the result of representation which was made, steps were immediately taken by the Authority concerned for the water in the pond to be treated and kept under observation. Although treatment of the known breeding places was periodically carried out, the attention of the Department was still being drawn to the presence of large numbers of mosquitoes, and it was not until some time had elapsed that the possibility of mosquito breeding in street gullies was considered. Investigation revealed that mosquitoes in large numbers were resting in the street gullies during the day time. Arrangements were accordingly made by the Department concerned for the gullies in the area affected to be cleansed and flushed. All the gullies were afterwards treated with larvicide. Special measures were also taken in order to deal with mosquito breeding underneath a portion of one of the Corporation's refuse tips.

During the year 1,080 gallons of oil and larvicide were used by the Department.

It is of interest to note that specimens of mosquitoes and mosquito larvæ obtained in the City were submitted to the Director of the British Mosquito Control Institute at Hayling Island, who reported such specimens confirmed an investigation which was being carried out at their laboratory and indicated a new strain of *culex pipiens* of a vicious character which had not yet been named.

It is the intention of the Corporation to continue anti-mosquito work during 1936.

The large pond near the Humber foreshore (to the east of King George Dock) as now been completely filled in. The filling in of a similar pond in West Hull ad not been completed at the end of the year.

GENERAL SANITATION.

Open Spaces. From a return prepared by the General Superintendent of arks, etc., it appears that there are in the City and immediately adjoining it, pproximately 753 acres of Public Parks, Gardens, Recreation Grounds and open paces owned by the Corporation. They include 4 parks, 2 golf courses, 8 large laying fields, 2 boating lakes and various smaller open spaces upon which children's laying equipment has been erected. The Education Committee has purchased 2 acres for 4 additional school playing fields. Educational Institutions, including he University College and Hymers College, have the use of over 280 acres of ground or school sports, and private sports grounds used by different clubs and organiations associated with places of worship and large manufacturing firms, occupy ver 243 acres. The land owned or tenanted by the Corporation and used for ublic allotments is 265 acres, in addition to which 84 acres privately owned are nder cultivation. As stated in previous reports, the importance to the public ealth of developing facilities for open-air recreation cannot be over-rated.

Public Baths, Wash-houses, etc. The total attendances at the public swimming, lipper, electro-medical and vapour baths and public wash-houses during 1935 as 756,258; and the electro-medical and vapour baths have again been highly ppreciated as shown by the number of treatments having been 1,500 above the gure for the previous year.

The wash-house in St. Paul Street continues to serve a useful function, and the ecessity for a new wash-house in Hessle Road is proved by the fact that over 9,000 persons availed themselves of the facilities provided. A site has been acquired Beeton Street on which to erect a new wash-house in East Hull.

Mortuary. The public mortuary is situated in a disused burial ground in astle Street. Attached is a properly equipped post-mortem room for the use f medical practitioners, at which 153 post-mortem examinations were held in 1935.

There is no Coroner's Court, and inquests are usually held at the Coroner's ffice, Lowgate.

Dr. Norman Jennings, His Majesty's Coroner for the City, has kindly urnished the following statistics in relation to inquests, post-mortems, etc., eld in the years 1929 to 1935.

	1931	1932	1933	1934	1935
Inquests and post mortems (including post mortems where inquests were found to be unnecessary)	397	331	353	358	343
Enquiries, etc., in connection with which there were no post mortems	91	75	81	68	69
	488	406	434	426	412
Inquests with Jury, exclusive of adjournments	95	86	71	106	79
Bodies at—					
City Mortuary	190	140	159	164	156
Anlaby Road and Beverley Road Public Assistance Institutions, Hull Royal Infirmary, Children's Hospital, etc.	298	266	275	262	256
	488	406	434	426	412

Deaths from Road Vehicular Accidents. Coroners (Amendment) Act, 1926, 13 (2) (*d*). The Coroner has also been good enough to supply the following information on the fatal road accidents which occurred in his area during 1935.

Inquests with jury are required in all fatal accidents due to the use of a vehicle in a street or "public highway." During 1935, 42 such inquests were held, as against 43 in the previous year. Of the total in the year under review, 31 were in respect of accidents that occurred in the City and 11 in regard to accidents outside the City Boundary. The total for 1934 included 34 in the City and 9 outside.

A summary of the facts established in the 31 local cases in 1935, is as follows :—

Pedestrians (16)—14 knocked down as the result of stepping off the pavement or running across the road, namely, 13 by motor vehicles and one by a pedal cyclist. The 13 motor vehicles comprised motor lorries, 6 ; motor cars, 4 ; motor cycles, 2 ; and motor van, 1. The other 2 cases were a child who fell off the pavement under a horse-drawn rully, and an old man who was knocked down by a van which mounted the pavement following a skid.

Push Cyclists (8)—7 collided with motor vehicles—motor lorries, 3 ; motor cars, 2 ; motor bus, 1 ; and motor cycle combination, 1. The other case was that of a cyclist who died following a collision with a steam wagon 5 years previously.

Motor Cyclists (3)—2 died after collisions with motor lorries. The third case was that of a driver of a motor cycle combination which overturned in avoiding another vehicle.

The remaining 4 cases were those of a man who was crushed between 2 motor lorries, one of such lorries backing towards the other, and 3 boys 1 run over by a motor lorry when he was taking off a pair of skates, 1 run over by a similar vehicle whilst trying to get on to it, and 1 run over by a motor lorry trailer after running and slipping beneath it.

The persons killed, etc., numbered 20 males and 11 females. The age periods of the males were: under 5 years, 0; 5 to 15 years, 9; 15 to 25 years, 2; 25 to 45 years, 3; 45 to 65 years, 1, and 5 whose ages were 75, 76, 79, 80 and 92 years respectively. The 11 females were aged 2, 3, 5, 7, 14, 14, 28, 52, 67, 71 and 78 years respectively.

Disposal of the Dead. The General Superintendent of Parks, etc., reports that, in connection with the disposal of the dead, the Ministry of Health has sanctioned the provision of a further 6,500 grave spaces at the Northern Cemetery for the bodies of 37,500 persons. This additional accommodation is consequent on the development of the northern boundary of the City.

Cremation. The Crematorium is on a site adjoining the Hedon Road Cemetery. It was the first Municipal Crematorium in the country, and was opened on the 2nd January, 1901, the first cremation taking place on the 7th January of the same year.

Year.	*No. of Cremations.*
1901–5	83
1906–10	119
1911–15	123
1916–20	168
1921–25	222
1926–30	378
1931	128
1932	126
1933	148
1934	183
1935	194
Total	1872

The Parks and Burial Committee is now proceeding with the erection of a Columbarium and Garden of Rest on a site of about ¾ acre situate on the west side of Chanterlands Avenue, approximately 100 yards from the entrance to the Northern Cemetery.

Training of Sanitary Inspectors. The arrangements for the practical training of Sanitary Inspectors have been continued in accordance with the Regulations of the Royal Sanitary Institute and the Sanitary Inspectors' Joint Examination Board. During 1935, eight persons were granted permission to undertake the course of training, but had not completed it at the end of the year.

Arrangements were again made by the Local Education Authority for a course of lectures, in preparation for the examination for the certificate, to be given at the Technical College on two evenings a week for a period of 26 weeks, between September and April. The fee for the course was the same as last year, *i.e.*, £1 1s., payable to the Local Education Authority ; 26 students enrolled, 24 of whom were continuing the course at the end of the year. In the other 2 cases the students concerned obtained employment out of town and were thus unable to complete the course.

It is interesting to note that of the 24 persons who, since the inception of the scheme in 1929, have completed their training with the Health Department, 14 have successfully passed the examination of the Royal Sanitary Institute and the Sanitary Inspectors' Joint Examination Board.

HOUSING.

GENERAL HOUSING CONDITIONS.

Construction of Houses. During the year the Corporation have erected 268 houses and flats.

Situation	No. of houses and flats erected under State aided schemes.		Without State aid.	Total
	Other than Slum Clearance	In connection with Slum Clearance		
New George Street	—	88	—	88
North Hull Estate	—	180	—	180
Total	—	268	—	268

This brings the total number of houses and flats erected by the Local Authority since the War to 8,615, 8,348 of these being under State aided schemes and 267 being erected in connection with City improvements, and in connection with shops on the North Hull Estate. Six houses and 3 flats with shops attached and an Estate Office and flat have been erected by the Local Authority on the North Hull Estate without State assistance.

These houses and flats are of 7 main types, particulars of which are given below :—

Estate.	General (excluding 1930 Act).				1930 Act.			Total.
	Parlour 3 bedroom type.	Non-parlour 3 bed-room type.	Non-parlour 2 bed-room type.	Non-parlour 1 bed-room type.	Non-parlour 3 bed-room type.	Non-parlour 2 bed-room type.	Non-parlour 1 bed-room type.	
Houses.								
North Hull	780	776	650	—	580	568	—	3354
West Hull	732	488	222	—	—	—	—	1442
East Hull .	1146	330	904	—	—	—	—	2380
Derringham Bank	204	261	196	—	—	—	—	661
Sec. 12 (3) Scheme	25	45	—	—	—	—	—	70
Westcott Street ..	12	12	10	—	—	—	—	34
Barnsley Street ..	—	—	—	—	58	54	—	112
Flats.								
New George Street	—	—	32	23	24	116	—	195
Southcoates Lane		31	66	—	23	54	—	174
Madeley Street .		18	24	12	—	—	—	54
Barnsley Street .		12	12	—	—	48	12	84
Hedon Road		—	18	—	—	—	—	18
Derringham Bank		1	—	—	—	—	—	1
North Hull .		4	—	—	—	32	—	36
	2899	1978	2134	35	685	872	12	8615
Of which there were erected during 1935	—	—	—	—	80	188	—	268

Private builders have erected 1,411 houses during the year, the majority of these being for sale.

It is known that, for various reasons, 422 houses were demolished and 9 houses were rendered unusable in 1935. Therefore the net increase during the year in the number of dwelling-houses in the City was 1,248.

The following table shows the housing progress which has been made since 1921 :

NUMBER OF HOUSES BUILT, 1921–1935.

Year	With State Assistance.		Without State Assistance.		Total.
	By Local Authority.	By Others.	By Local Authority.	By Others.	
1921 to 1925.	1067	685	—	440	2192
1926	1006	737	—	148	1891
1927	1269	596	—	159	2024
1928	1008	303	—	167	1478
1929	454	346	—	115	915
1930	488	—	226	379	1093
1931	408	232	20	753	1413
1932	1668	268	11	978	2925
1933	174	–	10	1443	1627
1934 .	538	—	—	1367	1905
1935	268			1411	1679
Totals	8548	3167	267	7360	19142

The Corporation's building programme for 1936 includes the erection of 588 houses and flats in completion of existing contracts. General approval has been given by the City Council to the erection of 482 houses, but these have not yet been formally sanctioned.

Central heating installations are fitted in 3,246 houses, whilst 214 houses have been provided with electric cooking and washing installations by the Housing Committee. In many other cases the occupying tenants have themselves placed orders with the Electricity Department for electric cookers and other electrical appliances.

Wash-basins have been installed in 1,276 houses on the Corporation Estates during the year.

Slum Clearance New Five-Year Programme, 1934-38. Satisfactory progress has been maintained in respect of the Five-Year Slum Clearance Programme, 1,227 dwelling-houses having been represented, 973 as a result of Area action under Section 1 of the Housing Act, 1930 and 254 by individual action under Sections 19 and 20 of the Housing Act, 1930.

GENERAL ACTION TAKEN AS REGARDS UNFIT HOUSES.

(*a*) *Under the Public Health Acts.*

During the year, 553 statutory notices were served under the Public Health Acts, mostly in respect of nuisances existing in dwelling-houses.

At the end of the year, 146 notices were not complied with. Those complied with during the year include the 87 mentioned as outstanding at the end of 1934.

Informal Action.

Notices were served in respect of 4,347 dwelling-houses, and 3,850 houses were rendered fit in pursuance of informal notices.

(*b*) *Under the Housing Acts.*

During the year, 95 houses were represented under the provisions of Sections 19 and 20 of the Housing Act, 1930, as unfit for human habitation, and demolition orders were made in respect of 86 houses. Undertakings under Section 19 (2) of the Housing Act, 1930, were accepted in regard to 11 houses; and the question of the making of demolition orders in respect of 48 houses already represented will be considered during 1936.

Pursuant to the making of demolition orders, 108 houses were demolished during the year, 27 of these being in respect of Orders made in 1934.

No statutory action under Section 17 of the Housing Act, 1930, was taken during the year.

Informal Action.

In accordance with the provisions of the Housing Consolidated Regulations, house-to-house inspection was carried out in connection with 719 dwelling-houses, and of these 580 were found to be in such a state as to be unfit for human habitation, but capable at reasonable expense of being made so fit: during the year 734 houses were made fit as the result of informal action.

Unhealthy Areas. Subsequent to the making of the following Orders by the City Council :—

Jane Street Clearance Order,
Edgar Street Clearance Order,
Witham Clearance Order,
Porter Street No. 1 Clearance Order,
Porter Street No. 2 Clearance Order, and
William Street Compulsory Purchase Order.

Ministry of Health Inquiries were held on 12th February, 4th June and 24th September, 1935.

The following table shows briefly as at 31st December, 1935, the position with regard to Orders made in respect of Unhealthy Areas :—

Title of Order.	Date of Confirmation.	Area in acres.	No. of Houses.		No. of Persons.	
			Total.	Demolished to date.	Dispossessed.	Yet to be dispossessed.
Canning Street Clearance Order	April 23, 1931	1·260	130	130	451	Nil
Sykes Street Compulsory Purchase Order No. 1	June 1, 1931	1·817	120	120	611	Nil
Sykes Street Compulsory Purchase Order No. 2	June 1, 1931	·842	57	57	305	Nil
Aldbro' Street Compulsory Purchase Order	May 14, 1931	·530	40	40	174	Nil
Scott Street Clearance Order	September 15, 1933	·518	66	66	245	Nil
Hodgson Street Clearance Order	September 15, 1933	·127	17	17	75	Nil
Church Street (Drypool) Clearance Order	July 16, 1934	2·725	162	162	674	Nil
Jenning Street (The Groves) Clearance Order	December 22, 1934	2·23	166	166	690	Nil
Witham Clearance Order	April 12, 1935	·453	40	22	81	61
Jane Street Clearance Order	April 11, 1935	·538	45	3	9	153
Edgar Street Clearance Order	April 11, 1935	·271	25	25	83	Nil.
Porter Street No. 1 Clearance Order	August 6, 1935	2·69	182	Nil	Nil	611
Porter Street No. 2 Clearance Order	August 6, 1935	·184	7	Nil	Nil	9
Totals		11·215	1057	808	3398	834
					4232	

In addition, the following Compulsory Purchase Order and Clearance Areas were represented and submitted to the Ministry of Health for confirmation :—

	No. of Houses.	No. of Persons.
William Street Compulsory Purchase Order	193	691
Jenning Street No. 2 Clearance Order	29	117
Little George Street Clearance Order	16	64
Hodgson Street No. 2 Clearance Order	18	110
Hodgson Street No. 3 Clearance Order	13	37
Osborne Street Clearance Order	31	122
Woods Lane Clearance Order	28	107
Total	328	1248

The re-housing in connection with the Witham, Jane Street, Porter Street No. 1 and Porter Street No. 2 Clearance Orders will be completed early in 1936.

The inspection of 5 areas is in progress and it is proposed in the near future to make official representation in respect of these areas.

Clearance of Individual Slum Houses. In general, no serious difficulty has been encountered in connection with work under Sections 19 and 20 of the Housing Act 1930, although during the year appeals were lodged against Demolition Orders affecting 6 houses. The County Court Judge found in favour of the appellant in respect of Nos. 16 and 18 York Street ; the Demolition Orders were quashed and an undertaking accepted to render the dwelling-houses fit for human habitation. With regard to Nos. 1 and 2 Providence Place and Nos. 112 and 114 Thomas Street, the County Court Judge found in favour of the Corporation and upheld the Demolition Orders.

Since the Housing Act, 1930, came into operation representations have been made in respect of 898 houses.

Re-housing. Under the Housing Act, 1930, 6,547 persons have been dispossessed by slum clearance, and corresponding accommodation has been made vailable on the North Hull Housing Estate, in Newtown Buildings, in Barnsley treet, in New George Street, in Sykes Street and in Aldbro Street.

It is gratifying to note that the tenants dispossessed from slum clearance roperty, have, in the majority of cases, proved that they are appreciative of the ıore modern accommodation now placed at their disposal.

Measures to prevent infestation by vermin of new houses have been maintained ıroughout the year with highly satisfactory results.

Central re-housing in two-story Cottage Flats has been provided on the sites ı Aldbro' Street and Sykes Street, made available under Compulsory Purchase rders, and also in Barnsley Street.

Housing Act, 1935. The Housing Act, 1935, came into operation on the 2nd ugust of that year. This Act promises the first real attempt to remedy overowding prevalent in industrial areas, which, in the opinion of all social and ousing reformers, has for long been a menace to health. Further, a national andard of overcrowding is now established.

The ascertainment of overcrowding necessitates the undertaking of a survey y the local authority of all dwelling-houses in their area which are used by or e suitable for members of the working classes. Some idea of the magnitude of ıe task thus imposed may be gathered from the fact that in Hull approximately),000 dwelling-houses will have to be inspected.

This survey, which commenced on 2nd December, 1935, is being continued 1936. Ten temporary enumerators and 2 temporary assistant housing inspectors ıve been engaged for this purpose under the supervision of the Senior Housing ıspector.

FOOD INSPECTION.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply. The inspection of dairies and of retail purveyors' premises and the supervision of bottling and wholesale establishments in the City are carried out by the staff of the Chief Sanitary Inspector. Cowsheds and herds are inspected by the staff of the Chief Food Inspector.

The following figures show the amount of milk consumed daily in Hull:—

Amount arriving by road	17,800	gallons
,, ,, rail	1,500	,,
,, produced in the City	1,700	,,
Total	21,000	,,

Included in the above figure is an amount of approximately 5,900 gallons of milk of special designation, *i.e.*, "Certified," "Grade A (Tuberculin Tested)," "Grade A," and "Pasteurised." The quantity of "Pasteurised" milk supplied to schools under the Milk in Schools Scheme is included in the last-mentioned figure.

The amount of milk consumed in the City averages approximately 0·5 pint per person per day.

Retail Purveyors, Dairymen, etc. 301 applications for registration were received, compared with 323 last year. Of the former number, 241 were for the sale of milk in bottles only.

The following numbers of persons and premises were registered:—

Retail Purveyors	241
Dairymen and Dairy premises	41
Cowkeepers	19
	301

Three applications for registration as retail purveyors of milk or dairymen were not proceeded with.

The Corporation refused to register a person as a retail purveyor of milk owing to the nature of the commodities sold from the premises.

There are about 2,000 milk traders on the registers, the great majority being persons carrying on small businesses of a general nature who sell very small quantities of milk for the convenience of their customers. About 1,600 of these traders sell bottled milk only.

Graded Milks. 18 dealers and 6 supplementary licences for "Certified" Milk; 1 bottler's, 4 dealers' and 5 supplementary licences for "Grade A" Milk; and 4 licences for "Pasteurised" Milk were issued during the year: a total of 38 licences, the same number as last year.

The advantages of using milk of special designation are still not fully appreciated by a large section of the public. The quantity of such milk sold in Hull, approximately 5,900 gallons per day, is but a small proportion of the milk consumed in the City, viz., 21,000 gallons. It may be mentioned incidentally that apart from graded milk, some 3,900 gallons of "bottled" milk are sold daily in the City.

The Department endeavours to bring to the notice of the public the advantages of using these specially designated milks, and all possible assistance and information are given both to dealers and consumers.

The price of "Certified" Milk is 4d. and of "Grade A" milk, 3½d. and 4d. per pint. The price of milk other than that of these designations is governed by the Milk Marketing Board Scheme, and varies between 3d. and 3½d. per pint.

Milk (Special Designations) Order, 1923. *Bacteriological and Chemical Examinations.* During the year, 134 samples of designated milk were taken for examination for bacterial content, namely:—

"Certified" Milk	90
"Grade A (Tuberculin Tested)"	1
"Grade A" Milk	20
"Pasteurised" Milk	23

A chemical analysis was also made of each sample of designated milk.

"Certified" Milk. The Ministry of Health again appointed the City Analyst to examine "Certified" Milk distributed in this area. The bacterial contents of the samples examined were:—

Total Samples.	Bacteria per cubic centimetre.			
	Under 1,000	1,000 to 5,000	5,000 to 30,000	Over 30,000
90	13	59	13	5

The Order prescribes that this grade of milk must not contain more than 30,000 bacteria per 1 c.c. One of the samples which contained an excessive number of bacteria, also failed to satisfy the Bac. Coli test. In addition, 6 samples did not comply with that test although the bacterial count was satisfactory.

"*Grade A (Tuberculin Tested)*" *Milk.* One sample was taken. The milk contained only 1,500 bacteria per c.c. and satisfied the Bac. Coli test.

The maximum number of bacteria prescribed for this grade of milk is 200,000 per c.c. This grade of milk has not been on sale by retail in the City, but has been supplied under contract to a Corporation Hospital.

"*Grade A*" *Milk.* The bacterial contents were :—

Total Samples.	**Bacteria per cubic centimetre.**			
	1,000 to 5,000	**5,000 to 30,000**	**30,000 to 100,000**	**100,000 to 200,000**
20	10	5	4	1

The maximum prescribed for this grade of milk is 200,000 bacteria per c.c. All the samples passed the Bac. Coli test. As two churns containing " Grade A" milk were found to be improperly marked, letters of caution were sent to the dealers.

All the " Certified " and " Grade A" milk sold in the City was produced in the East Riding, and the Medical Officer of Health of that Authority was notified of the results of the examinations of the above-mentioned samples.

" *Pasteurised* " *Milk.* The bacterial contents of the 23 samples were as under :

Total Samples.	Bacteria per cubic centimetre.				
	Under 1,000	1,000 to 5,000	5,000 to 30,000	30,000 to 100,000	Over 100,000
23	6	10	3	1	3

The maximum prescribed for this grade of milk is 100,000 bacteria per c.c.

One of the samples which contravened the standards was obtained from a person who had applied for a pasteuriser's licence. The applicant was notified of the result of the examination ; whilst a Corporation Sampling Officer advised him as to the manner in which he could improve his methods of treating the milk ; he subsequently obtained a pasteuriser's licence. A letter of caution was addressed to each of the other pasteurisers regarding the remaining 2 unsatisfactory samples.

Bacteriological Examination of Non-designated Milk. 146 samples of non-designated milk were taken for examination for bacterial content. (The samples were also chemically examined.) Eighty-two contained between 1,000 and 30,000 bacteria, 49 between 30,000 and 200,000 bacteria, and 15 contained 200,000 bacteria and upwards per 1 c.c. 11 of the third group and 30 of the other two groups were returned positive to the Bac. Coli. test.

Letters are sent to the producers and/or dealers in all cases where the bacterial count exceeds 200,000, or where a positive result is returned to the Bac. Coli. test, and, where necessary, the facts are communicated to the appropriate officers of the district in which the milk is produced.

Examination of Milk for Tuberculosis. Examinations of milk for tuberculosis by the Biological Test were carried out by Dr. W. W. Adamson, the Honorary Pathologist to the Hull Royal Infirmary.

Of 200 samples submitted for examination by the inoculation of guinea pigs, 13, that is 6·5 per cent., showed the presence of tubercle bacilli. The percentage in 1934 was about 2·0, when 195 samples were examined ; 10 of the positive samples were produced in the East Riding and the Medical Officer of Health of that area was immediately notified under Section 4 (1) of the Milk and Dairies (Consolidation) Act, 1915. In each case he gave the Corporation's Veterinary Officer the opportunity of inspecting, along with the County Veterinary Officer, the herd from which the infected sample had been produced.

Particulars of the action taken to trace the 13 positive samples are given below :—

No. of Cases.	
4.	The clinical examination in each case showed that one cow was affected with tuberculosis within the meaning of the Order. Such animals were slaughtered and found to be suffering from generalised tuberculosis. Samples taken from the " in-contact " cows proved negative.
4.	The clinical examinations did not reveal the presence of tuberculosis. Samples taken from the cows were negative.
3.	There was, on examination, no clinical evidence of tuberculosis. One cow

in each of the herds had, prior to such examination, been sent to the knackers, and these were probably the offending animals. Samples taken from the "in-contact" animals proved negative.

2. The clinical examinations did not reveal any evidence of tuberculosis in the animals. Group samples were taken and in the case of each herd one sample proved to be positive. The affected animals were slaughtered and found to be suffering from generalised tuberculosis.

Tuberculous Cows in the City. The method adopted to discover tuberculous milk produced in the City is by periodical inspection by the Authority's Veterinary Officers of the cows kept in the cowsheds within the city.

During the year, 4,091 examinations were made of cows for clinical signs or symptoms of tuberculosis. Samples were taken from 27 cows suspected to be suffering from tuberculosis, and were submitted to bacteriological examination. Five samples were returned as positive for tubercle bacilli, and the cows from which these samples had been obtained were slaughtered under the provisions of the Tuberculosis Order, 1925.

The Tuberculosis Order, 1925. The Chief Veterinary Officer reports :—

The Department's Officers discovered in cowsheds in the City 14 cows which they suspected to be suffering from tuberculosis. These animals were slaughtered and the post-mortem examinations confirmed the presence of the disease.

In consequence of samples of tuberculous milk produced in the East Riding having been obtained within the City, the Veterinary Inspector, in conjunction with the Veterinary Inspector to the East Riding County Council, examined 200 cows in cowsheds in that area and 3 of the cows were afterwards slaughtered by the East Riding Authority under the provisions of the Tuberculosis Order.

Cowsheds. There are 85 registered cowsheds in the City, which afford accommodation for 1,455 cows. During 1935 a Veterinary Inspector paid 349 visits to the cowsheds. Four informal notices were served and several verbal warnings were given regarding the abatement of nuisances and the registration of premises, and these were complied with under the supervision of the Department. A Veterinary Inspector visits each cowshed four times a year.

Milk and Dairies Order, 1926, *etc.* Examinations were made of 919 milk churns, 1,221 hand-cans and 370 vehicles.

The following contraventions were discovered :—

In 38 cases the name and address of the owner was not inscribed on the vehicle or receptacle.

6 receptacles containing milk intended for sale were deposited in streets and left unattended for long intervals.

4 receptacles were found being returned to producers without being properly cleansed.

In 1 case a dog, and, in another instance, matter likely to contaminate milk, were being conveyed in a vehicle at the same time as milk.

In 3 cases "separated" milk was being sold from receptacles not properly marked.

1 vehicle was found to be in a dirty condition.

In 2 cases milk was being bottled elsewhere than at registered dairies.

Proceedings were taken against the retailer who carried a dog in a vehicle along with milk, and he was fined 10s. 6d.

In the case of the remaining infringements, the responsible parties were cautioned either verbally or by letter.

Public Health (Condensed Milk) Regulations, **1923** *and* 1927, *and Public Health (Dried Milk) Regulations,* **1923** *and* 1927. Included in the samples obtained under the Food and Drugs (Adulteration) Act, 1928, were 6 samples of condensed milk, 6 of evaporated milk and 4 of dried milk, all of which were genuine.

The Regulations were, however, contravened in three of the cases, as the essential parts of the labels borne by two tins of condensed milk were not printed within a surrounding line, whilst a portion of the wording printed on the essential part of the label upon a tin of evaporated milk was less than the required size.

The Ministry of Health was notified of these contraventions, and letters of caution were addressed to the retailers and or importers.

Ice Cream. During the year, 147 applications for registration were received : 9 for the manufacture and 138 for the sale of ice cream. Seventeen of these applications, 1 for the manufacture and 16 for the sale of ice cream were not granted.

At the end of the year there were 464 premises on the register; 55 for the manufacture and 409 for the sale of ice cream.

Twenty-three samples of ice cream were taken for bacteriological examination, 5 of which were satisfactory, 4 fairly satisfactory and 14 unsatisfactory. Eleven of the unsatisfactory samples showed the presence of Bac. Coli. in amounts varying from 1/10,000th c.c. to 1/10th c.c. of the ice cream; in addition, 4 of these samples had bacterial counts varying between 1,000,000 and 4,000,000 per c.c. The remaining 3 unsatisfactory samples contained from 1,000,000 to 10,000,000 bacteria per 1 c.c. The District Sanitary Inspectors were instructed to pay special attention to the manufacturers' premises.

Letters of caution were addressed to all the manufacturers and retailers regarding the unsatisfactory samples.

Food and Drugs (Adulteration) Act. The number of samples examined was 2077, of which 116, or 5·6 per cent., were adulterated; the corresponding percentage for 1934 was 5·9; in that year 1,893 samples were taken. In England and Wales 5·3 per cent. of the samples analysed in 1934 were found to be adulterated.

Samples of Milk taken in Hull numbered 1,262, of which 75 or 5·9 per cent. were not genuine. The percentage for 1934 was 5·5.

Other samples reported against were: Butter (5), Potted Meat and Shredded Suet (3 each); Gin, Coffee, Digestive Tea, Pork Dripping, Lard, Jam, White Pepper, Glycerine of Borax, and Mercury Ointment (2 each); Wine, Lemon Squash, Beef and Pork Dripping, Salmon Roll, Separated Milk, Lemon Curd, Malt Vinegar, Bread and Butter, Pickled Onions, Compound Tincture of Rhubarb, Lime Water, and Gregory's Powder (1 each).

The footnotes to Appendix 17 (pages 195 and 196) give details of the action, apart from legal proceedings, taken in connection with the adulterated samples.

Legal proceedings were instituted regarding 20 samples, and particulars are given in Appendix 18 (pages 197 and 198).

Full particulars of the samples analysed are set out in Appendix 17 (pages 192 to 195). Further, the City Analyst, Mr. A. R. Tankard, F.I.C., F.C.S., publishes in his Annual Report full details of the work done by him under the Food and Drugs (Adulteration) Act.

"Appeal to Cow" Samples. During the year 20 "Appeal to Cow" samples were obtained in following up samples under the Food and Drugs (Adulteration)

Act, several being taken, at our request, by officers of the East Riding of Yorkshire County Council as the cowsheds were in that area. Fourteen of the samples were satisfactory, but 6 produced by two herds were of unusual composition. In these 2 cases letters of caution were sent to the producers, who were also the vendors of the original samples.

Labelling of Margarine. 15 samples of margarine were obtained. As 3 of the samples were sold in improperly marked wrappers, letters of caution were sent to the vendors.

"Dirt" in Milk. 20 formal samples of milk were reported to contain dirty sediment ; 17, repeated specially for examination for the presence of "dirt," were declared to be of satisfactory character. One of the formal samples could not, however, be repeated for special examination for dirt, as the vendor had given up business. In the remaining 2 cases further ordinary formal samples were not reported to be dirty. Letters of caution were sent to the vendors of 19 of the original samples.

Public Health (Preservatives, etc. in Food) Regulations, 1925 *to* 1927. 1,855 of the samples taken under the Food and Drugs (Adulteration) Act were examined for preservatives : 9 contravened the Regulations, and details of these samples and the action taken are set out in Appendix 19 (pages 199 and 200).

Artificial Cream Act, 1929. In only one case was application made for the registration of premises for the sale of artificial cream, and this was granted.

Fertilisers and Feeding Stuffs. 27 inspections were made, viz., at 8 retailers' premises, 3 manufactories, 6 farms, 5 merchants' premises and 5 warehouses. It was found that the statutory requirements were not being observed at 7 of the places, and the responsible parties were cautioned, either verbally or by letter.

Six samples of fertilisers and 21 feeding stuffs were obtained. One of the fertilisers and 1 feeding stuff were taken from works within the City, as the result of communications received from other Authorities, whilst 2 of the other samples of feeding stuffs were obtained at the request of a General Inspector of the Ministry of Agriculture and Fisheries. 18 feeding stuffs and all the fertilisers were reported to be satisfactory, whilst the remaining 3 feeding stuffs were unsatisfactory for the following reasons :—

1—The product was not entitled to the description given to it by the seller, as the amount of protein present was below that prescribed.

1—Deficient in oil.

1—No statutory statement given.

In the first case a " repeat " formal sample proved satisfactory ; in the second a letter of caution was sent to the manufacturers ; and the third case is being pursued.

Poisons and Pharmacy Act, 1908. Three inspections were made of premises occupied by persons licensed for the sale of poisonous substances used for agricultural and horticultural purposes. It was found that poisons were being kept and sold in accordance with the Regulations.

Bakehouses. There are 287 bakehouses on the register, comprising 72 factories and 215 workshops. 932 inspections were made ; 45 verbal or written notices were given or sent where the half-yearly cleansing had not been carried out ; and at the end of the year the required work had been done at 41 of the premises. Five other defects were found in bakehouses ; 5 defects, including 1 outstanding from last year, were remedied, whilst the remaining item is being dealt with.

Refreshment Room Kitchens and Other Workplaces. There are 115 workplaces on the register, at which 168 males and 427 females are employed. 56 of the workplaces were visited and found to be in a cleanly condition. 101 of the workplaces are refreshment room kitchens, whilst at the others, fruit sorting, tea packing, bottle washing, etc., are carried on.

WORK OF THE FOOD AND VETERINARY DEPARTMENT.

The following is a summary of the report of Mr. H. P. Lewis, M.R.C.V.S., the Chief Food Inspector : much of the work described in the preceding section is also done by this Department.

Scope of Work. Food inspection is carried out by the Chief Food Inspector and five assistants, one of whom is a qualified Veterinary Inspector. Their duties include the inspection of the cattle and fish markets ; the slaughterhouses ; and all meat, fish and fruit sold in the City ; of cowsheds and cows therein ; and of all retail shops, other than dairies, where food is sold. Milkshops and dairies are under the supervision of the Chief Sanitary Inspector's Staff. The Food Department is also responsible for the inspection of food for the Hull and Goole Port Sanitary Authority ; for examinations and reports under the Contagious Diseases (Animals) Acts and the Orders of the Ministry of Agriculture ; and for the supervision and treatment of the horses, cattle and other stock belonging to the various Committees of the Corporation. A further responsibility is the administration of the Performing Animals (Regulation) Act, 1925. The Veterinary Inspectors also act on behalf of the Police in cases of alleged cruelty to animals.

Merchandise Marks Act, 1926. During the year a notice, setting forth particulars of the Merchandise Marks (Imported Goods) No. 7 Order, 1934, as modified by the Merchandise Marks (Imported Goods) Exemption Directions, requiring an indication of origin to be applied to imported meat, was sent to the butchers and pork butchers in the City.

Two infringements of the Merchandise Marks (Imported Goods) No. 1 Order, 1932, were discovered. In 1 instance foreign butter was sold in a wrapper marked " Empire " butter. A letter of caution was sent to the vendors. In the other case a sample of Empire butter, taken from butter in bulk not visible to the purchaser, was sold in a wrapper not marked with an indication of origin. Proceedings were instituted against the retailers, who were fined £5.

Proceedings were also taken in 2 other cases, namely, against an egg dealer for selling eggs from which the importation marks had been removed, and against a butcher for not marking imported meat. The egg dealer was fined a total of £91 10s., whilst the summons against the butcher was dismissed.

Slaughterhouses. There are 44 private slaughterhouses in the City, viz. :—

Registered	5
"Old" Licences	4
Licences renewable yearly	35

(*a*) The " Registered " slaughterhouses are those which were in use as slaughterhouses at the time the sections of the Towns Improvement Clauses Act, 1847, with respect to slaughterhouses, were brought into force by the Kingston upon Hull Improvement Act, 1854, and have continued to be used as slaughterhouses.

(*b*) The " Old Licences " are in respect of the slaughterhouses licensed between 1854 and 1891, the original licensees still being in possession of and using the premises as slaughterhouses.

(*c*) The " Yearly Licences " refer to slaughterhouses not coming within either of the two categories (*a*) and (*b*) above where the Corporation grant licences from year to year only, in accordance with Section 29 of the Public Health Acts Amendment Act, 1890, adopted in 1891.

The following table shows the numbers of animals slaughtered in 1935, as well as in 1934 and 1933, at the respective classes of slaughterhouses :

	Cattle (and Calves)	Sheep.	Pigs.	Total 1935.	Total 1934.	Total 1933.
5 Registered Slaughterhouses ...	1,940	6,000	3,420	11,360	9,792	9,792
4 Licensed Slaughterhouses (Old Licences)	1,552	4,800	2,736	9,088	8,002	7,997
35 Licensed Slaughterhouses (Yearly Licences)	13,611	42,029	23,952	79,592	82,353	82,189
1935	17,103	52,829	30,108	100,040	—	—
1934 ...	17,333	53,027	29,787	—	100,147	—
1933 ...	17,394	52,900	29,684	—	—	99,978

Slaughter of Animals Act, 1933. During the year this Authority has granted 9 licences (operating for a period of three years) to persons to slaughter or stun animals in accordance with the provisions of the Act. There were, at the end of the year, 228 persons licensed under the Act.

The Public Health (*Meat*) *Regulations*, 1924. During the year these Regulations have been well observed.

The number of notifications relative to the inspection of meat received at the Food Office was 794.

It is still difficult to keep those engaged in the transport and handling of meat alive to the requirements of the Regulations, and cautions have from time to time been given.

Unsound Food. Condemned meat is sold to a salvage firm which manufactures manure and meal from it.

Condemned fish is sold to the Hull Fish Meal and Oil Company, whose premises adjoin the Fish Dock.

The following is a summary of the unsound food surrendered or seized during the year :—

SUMMARY OF UNSOUND FOODSTUFFS DEALT WITH DURING THE YEAR.

	Tons	*Cwts.*	*Qrs.*	*Lbs.*
Meat	127	12	2	0
Fish	1,476	19	0	0
Fruit	12	15	3	8
Tinned Goods	17	9	0	0
Shellfish	4	3	0	12
Currants ..	—	2	2	0
Chocolate .	—	16	0	0

Agreements for Destruction of Unsound Foodstuffs. 5,607 agreements for the destruction of unsound foodstuffs were entered into by the owners and the Food Inspection Branch of the Health Department.

Bacteriology. In addition to the ordinary routine examinations, special microscopical preparations were made and examined from the blood and tissues of 680 animals, for the detection of the Anthrax Bacillus, 1 of which proved positive.

Fruit. 263 packages of fruit, etc., were sorted under supervision in the Corporation's warehouse: 119 packages were found to be unsound.

Premises used for the Manufacture of Potted Meat, etc. Particulars of the provisions of the local Act requiring the registration of these premises are given in the report for 1931.

Nine applications for registration of premises were received, 5 of which were granted; 2 were not granted as, in the opinion of the Corporation the premises were unsuitable; 1 was found not to be necessary as the premises were registered under the Factory and Workshop Acts, and the remaining application was not proceeded with, as the person concerned discontinued the manufacture of potted meat.

There are at present 29 premises registered for the preparation or manufacture of potted meat.

Apart from these places there are 48 premises, including meat factories, etc., in which food is prepared, which are regularly visited by the Department's Inspectors.

Particulars of Fish Landed from Trawlers, etc. The Department has an office on the Fish Dock, and an Inspector devotes practically all his time to inspecting fish at the docks and fish shops.

	No. of Trawlers	*Estimated Weight of Fish*	*Weight Unsound*		
		Tons	*Tons*	*Cwts.*	*Qrs.*
Bear Isle	539	56,951	197	16	3
Faroe Isles	1,096	25,684	13	10	0
Greenland	12	3,840	97	15	0
Iceland	1,745	105,173	884	10	3
Newfoundland	9	813	6	2	2
Norway (Herrings)	83	16,768	—	—	—
Norway (Mackerel)	19	317	—		3
Norway (Prawns)	24	264	—	—	—
Norway Coast	24	1,106	1	4	3
North Sea	700	10,947	21	10	1
White Sea	499	41,343	244	12	3
Ex. Rail	—	1,900	9	15	2
Totals	4,750	265,406	1,476	19	0

Food Inspection in Shops. The 442 butchers' and pork butchers' shops, and other shops where meat is sold were visited from time to time throughout the year.

One beast's head and tongue which was exposed for sale in an unsound condition in a butcher's shop was seized. Proceedings were instituted and the defendant was fined £1.

Fish and Game Shops. There were, at the end of 1935, 331 fried fish, 95 fish and game and 5 shellfish shops, and 53 smoke houses in the City. These premises are visited regularly by the Inspectors with a view to securing supplies of fresh and wholesome foodstuffs and maintaining general cleanliness of the premises and utensils.

Miscellaneous Visits and Contagious Diseases (Animals) Acts. Appendix 20, (pages 201 to 204) gives details of the inspections made by the Food Inspectors, and contains the Chief Veterinary Inspector's Report on the Contagious Diseases (Animals) Acts.

INFECTIOUS DISEASES.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

The material for this section has been supplied largely by Dr. D. A. Cadman, Senior Assistant Medical Officer of Health. The report by Dr. H. Mason Leete, Medical Superintendent of the Infectious Diseases Hospitals, will be found on pages 210 to 217.

The total number of cases of infectious disease brought to the notice of the Department during 1935 was 6,806, as against 4,969 for the previous year. The increase is due to the greater incidence of chicken pox and measles. Compared with the figures for the previous year, there was a decrease in the number of notifications received in 1935 in respect of the following diseases, namely, diphtheria, 120; erysipelas, 41, and pneumonia, 104. Increases were recorded in the numbers of cases of chickenpox and measles, the additional cases being 463 and 1,667 respectively.

Appendix 21 on page 205 shows the numbers of cases of the various diseases, and gives age periods, and the distribution of the cases over the various wards in the City.

Appendix 22, on page 206, gives a summary of the cases notified each year, including the number of deaths, and the number of cases removed to hospital over a period of years.

In the four quarters of the year, notifications of diphtheria, scarlet fever and chickenpox were received as under :—

	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Total.
Diphtheria	360	177	152	267	956
Scarlet Fever	171	137	150	289	747
Chicken-pox	621	624	418	367	2,030

The following table gives the notification-rates per 1,000 of the population for the principal notifiable infectious diseases and a comparison with the rates for England and Wales for the past five years :—

	Small-pox (variola minor).	Scarlet Fever.	Diphtheria.	Enteric Fever.	Puerperal		Erysipelas.
					Fever.	Pyrexia	
1935							
HULL	—	2·32	2·98		*0·49	*8·09	0·32
England & Wales	·	2·96	1·60	0·04	*3·60	*9·44	0·42
1934							
HULL		2·36	3·37	0·03	0·04	0·17	0·45
England & Wales	0·004	3·76	1·70	0·03	0·06	0·15	0·51
1933							
HULL	—	1·33	4·74	0·03	0·03	0·19	0·46
England & Wales	0·02	3·21	1·18	0·04	0·05	0·14	0·45
1932							
HULL	—	1·43	5·36	0·07	0·04	0·18	0·26
England and Wales	0·05	2·12	1·08	0·06	0·05	0·14	0·36
1931							
HULL ...	—	1·73	3·63	0·04	0·07	0·14	0·36
England & Wales	0·14	2·05	1·27	0·06	0·06	0·14	0·38

* Attack-rate per 1,000 births.

Scarlet Fever. The number of cases notified during the year was 747 ; this is 6 less than in the previous year. Six deaths were recorded in 1935, the death-rate being 0·02 per 1,000 of the population. 668, or 89 per cent. of the cases notified in 1935 were removed to the City Hospitals. In 73 cases the diagnosis of scarlet fever was not confirmed after treatment in hospital. The case mortality of the true cases was 0·9 per cent. There were 44 secondary cases, *i.e.* cases occurring in a family within 4 weeks of the onset of a previous case ; in 1 instance 2 secondary cases occurred in the same house and at another house 3 further cases were reported. There were also 32 " return cases," *i.e.*, a case occurring within 4 weeks of the return home from hospital of a patient who had been treated there for scarlet fever. On 3 occasions, 2 " return cases," and on another occasion 3 " return cases," resulted after the discharge of 1 patient. The return-case rate was 4·6 per cent. of those discharged and the infecting case-rate 3·9 per cent. of those discharged.

Practically all the cases were of the mild type which has been prevalent in this country for a number of years. Our hospital accommodation at the City Hospital, Cottingham, was not sufficient to meet the demands of all infectious cases, consequently use still had to be made of beds at the Evan Fraser Hospital for the nursing of scarlet fever patients.

Diphtheria. 956 cases of diphtheria were notified during the year ; this is 120 less than in 1934. 34 deaths were registered in 1935 and the death rate was 0·11 per 1,000 of the population compared with 0·20, 0·29 and 0·42 respectively, for the three previous years. The case mortality of notified cases was 3·56 per cent. against 6·04, 6·06 and 7·8 per cent. respectively for 1934, 1933 and 1932. Among the persons notified as suffering from diphtheria, 3 fatal cases occurred where the cause of death was certified to be due to some disease other than diphtheria. 944, or 98·7 per cent. of the cases notified were admitted to the City Hospital. 118 secondary cases occurred ; in 13 instances there were 2 secondary cases in 1 house, in 6 houses 3 secondary infections, and in another 6 further cases were reported. There were 9 return cases. These cases occurred despite the fact that no patient is discharged from hospital until negative results have been obtained in 2 consecutive faucial and nasal swabs. The return case-rate was 0·9 per cent. of those discharged, and the infecting cases were 0·9 per cent. of those discharged.

Sixty-three of the notified cases were " positive swab " cases found as a result of swabs taken at the schools or the school clinic by an Assistant School Medical Officer ; 44 of these were secondary cases discovered after being swabbed as " contacts " before they were allowed to return to school ; in many of these patients there were no clinical signs of a diphtheritic infection.

In 208 of the notified cases the diagnosis after treatment in hospital was altered to some disease other than diphtheria, and 104 were " carriers " with no clinical symptoms.

The following table shows the notifications and deaths in Hull, with corresponding rates per 1,000 of the population, during the past five years :—

Year.	*Cases Notified.*	*Notification Rate.*	*Deaths.*	*Death Rate per 1,000 Population.*
1931	1,145	3·63	94	0·30
1932	1,707	5·36	133	0·42
1933	1,517	4·74	92	0·29
1934	1,076	3·37	66	0·22
1935	956	2·98	34	0·10

A summary of the figures for 1935 shows that the disease was more prevalent during the first quarter of the year.

	Cases Notified.	*Deaths.*
1st quarter	360	9
2nd quarter	177	9
3rd quarter	152	8
4th quarter	267	8

It is gratifying to note a reduction in both the number of cases notified and the number of deaths in comparison with the figures for the previous year, and it is hoped that the downward trend in the incidence and mortality of this disease will continue during 1936.

During 1935 diphtheria was less severe in type than in recent years. In this report, on page 212, the Medical Superintendent of the Infectious Diseases Hospital gives information on the clinical character of the cases treated during 1935.

Anti-toxin is kept at the various police stations throughout the City, to be readily available at any time for the use of medical practitioners. During the year 45 phials of 8,000 units were obtained and used by various medical practitioners in the City. This anti-toxin is now provided free of charge to medical practitioners on request for immediate use.

During the year swabs taken from persons suspected to be suffering from diphtheria, or who had been in contact with a case of that disease, were examined by the City Bacteriologist. The number examined was 3,954, in regard to which the results were: Postive, 395; Doubtful, 159; and Negative, 3,400.

A report on all examinations, etc., carried out during the year by the City Bacteriologist appears on page 218.

Schick Testing and Immunisation against Diphtheria. The efforts to induce parents to have their children Schick-tested and, where necessary, immunised against diphtheria, were continued throughout 1935. Three clinics have been established to provide immunisation facilities free of charge. At the houses where cases of diphtheria occurred, special leaflets on the subject of diphtheria immunisation were distributed, and leaflets were given to parents at every available opportunity. Special articles on the subject also appeared in the Department's monthly journal "Health News." The Education Department readily co-operated in the work by allowing children to attend the clinics during school hours, after the parents' consent had been obtained.

Arrangements have also been made for a medical officer to visit the infants' departments of schools situate some distance from a clinic to immunise the children during school hours. The parents are given an opportunity to attend when the medical officer visits the schools. During 1935, out of 5,474 children in attendance at the schools dealt with, 1,304 parents' consents were received. 1,088 children were actually Schick tested; 188 were negative and 867 positive; immunising fluid was administered to 864 of the positive re-actors, and 24 children were immunised without being tested.

The campaign with regard to Schick testing and immunisation has been concentrated upon children between 5 and 7 years of age, and the scheme for carrying out the work upon school premises has been specially directed towards the children in these age groups. The response has been very disappointing. When it is remembered that the appeals of the Department to the parents to have their children immunised have been made during the course of a period of epidemic prevalence of diphtheria of the severe or "gravis" type, it is impossible to explain the attitude of indifference of the public towards this question. In only 24 per cent. of those circularised in these schools was the parents' consent obtained, and only 20 per cent. were actually tested and immunised.

Experience of diphtheria of the "gravis" type in Hull has strengthened the conviction that the only effective weapon for dealing with the problem as it affects the individual and the community is immunisation. Surely immunisation as an insurance against death from diphtheria should appeal to all thoughtful parents.

The numbers dealt with at each of the three clinics during 1935 were as follow :—

	Hanover Square.	Beverley Road.	Coltman Street.	Total.
No. of persons Schick tested	235	748	210	1193
No. of persons positive	97	340	133	570
No. of persons negative	132	355	70	557
Result not known	6	53	7	66
No. immunised after testing	105	337	140	582
No. immunised without testing	86	50	46	182
Total	191	387	186	764

The following is a summary of the school children dealt with at the clinics in connection with the Education Department :—

Total number of children attending the schools where circulars were distributed to obtain parents' consent	10,716
Number of Consent Forms received from parents	1,266
Number of Children who attended for Schick Test	1,057
Result of Schick Test—Positive	491
Negative	510
Not known ..	56
Number of Children Immunised	507

(Including 16 not tested).

PARTICULARS REGARDING NUMBER OF PERSONS RE-TESTED DURING THE YEAR.

Clinic	No. of re-tests.	Negative.	Positive.	Result not known.	Second Immunisation.
Hanover Square	110	97	1	12	1
Beverley Road	213	182	6	25	6
Coltman Street	125	109	11	5	11
At Schools	251	240	9	2	—
Total	699	628	27	44	18

Schick testing and immunisation were also done at the Children's Homes administered by the Corporation and at private schools, etc., in the City. The numbers dealt with at these places were as follow :—

Schick tested.	Negative.	Positive.	Immunised.		No. of Re-tests.	Negative.	Positive.
			Without test.	After test.			
41	30	11	21	11	10	10	—

The grand total of those primarily tested and immunised in the City during 1935 is as follows :—

Schick tested.	Negative.	Positive.	Result not known.	Immunised.		
				Without test.	After test.	Total.
2322	775	1448	99	227	*1457	1684

* Includes 19 persons, tested in 1934.

Thirty-four persons who had been Schick-tested or immunised were notified to be suffering from diphtheria, or as suspected cases of diphtheria. After treatment n hospital the diagnosis of diphtheria in 11 of these cases was not confirmed. In most of the other 23 the disease was mild in character, and there were no complications. In two instances the infective organism was of the "gravis" type, and in these cases it is satisfactory to note that the attack did not terminate atally as is so common with this type of the bacillus. Both these cases had had immunisation treatment, and one had given a negative result on re-test. A history of the 23 cases is set out below, from which it will be observed that the first 6 could not be regarded as definitely immune ; they are included in the list on account of their attendance at our immunisation clinics :—

4—had 1 dose of T.A.F. only after positive Schick test.
2—had 1 dose of T.A.F. without the Schick test.
7—had last dose of T.A.F. 8 to 18 months before onset of illness, but had not been re-tested.
5—immunised after positive Schick test 7 to 20 months previous to attack and had given negative results on re-testing.
3—negative reactions to the Schick test, 5, 7 and 16 months before onset of illness.
2—reported to have had immunisation treatment by private doctor, 15 months and 2 years previous to attack, but re-test not done.

It will thus be noted that only 8 persons who were Schick-negative contracted diphtheria, and these presented mild symptoms.

From the above it appears justifiable to conclude that the measures adopted by the Department for the prevention of this disease are producing good results, as of the 748 cases of true diphtheria, only 8 occurred in those who were Schick-negative.

Measles. During 1935 measles attained a greater incidence than had been recorded in any of the previous 5 years. Of the 2,541 cases of this disease brought to the notice of the Department, 1,548 occurred in the first quarter of the year, 424 in the second, 149 in the third and 420 in the fourth quarter. 484 of these were cases of Rubella, which was much more prevalent during 1935.

As measles is not a compulsorily notifiable disease, it can be assumed that many more cases existed than were investigated by the Department. The majority of the cases were visited as a result of the patients, or contacts, being absent from school on account of the disease ; lists of the absentees are forwarded to the Health Department by the Education Department. Others were discovered by the Health Visitors and some were traced through the Relieving Officers. In 92 cases only was a direct notification received from either a medical practitioner or the parents.

Thirty-four cases were admitted to the City Hospital and 55 other cases which had been sent into the hospital under a different diagnosis or for observation, were subsequently found to be measles, and were treated there during 1935. 91 cases were isolated and treated in the Institution Hospitals.

The Health Visitors paid 2,675 first and 105 re-visits to homes where measles cases were reported or suspected.

Although 28 deaths from measles were registered during the year the case mortality was comparatively low; this was doubtless due to the higher proportion of cases of Rubella. The death-rate was 0·09 per 1,000 of the population, compared with 3 deaths and a rate of 0·01 for the previous year, and 42 deaths and a rate of 0·13 for 1933. An allocation of the deaths in age periods is shown below:

	Under 1 year.	1 year to 2 years.	2 years to 5 years.	5 years and upwards.	Total.
1935 ...	10	4	11	3	28
1934	—	2	1	—	3

Whooping Cough. 27 deaths from whooping cough were reported during the year, giving a death-rate of 0·09 per 1,000 of the population, against 14 deaths and a rate of 0·04 in 1934, and 12 deaths and a rate of 0·04 per 1,000 in 1933. 12 of the deaths were infants under 1 year; 7 were children between 1 and 2 years; 6 were between 2 and 5 years, and 2 were over 5 years of age.

Whooping cough was also more prevalent than during the previous year; 343 cases were noted compared with 360 in 1934. The majority of cases are brought to our notice by the Education Department in the same way as measles. All cases reported are visited by the Health Visitors, who give advice to the parents. 381 first visits and 70 re-visits were made during the year to cases or suspected cases. In only 9 instances was the Department aware of any of the fatal cases before death took place. 97 children received treatment in the Institution Hospitals.

Diarrhœa. 77 deaths of infants under 2 years of age were recorded during the year, compared with 46 during 1934. The death-rate per 1,000 births was 12·9, against 7·8 for 1934, 13·1 for 1933 and 10·2 for 1932. The total number of deaths at all ages from this disease was 88, the death-rate per 1,000 of the population was 0·27. The death-rates for the previous 3 years were as follow:—0·18 in 1934, 0·26 in 1933 and 0·24 in 1932. The Health Visitors made 86 visits to cases of diarrhœa in children under 2 years of age. Further reference is made to infantile diarrhœa in the Maternity and Child Welfare Section (page 139).

The following table shows the age periods of the deaths compared with those for 1934:—

	Under 1 year.	1 year and under 2 years.	2 years and under 5 years.	5 years and over.	Total.
1935 ..	69	8	4	7	88
1934	43	3	2	9	57

Enteric Fever. No case of enteric fever was notified in Hull during 1935. Thus, for the first time on record, the City has been free from this disease for a period of one year.

The one death from enteric fever recorded in 1935 was that of a resident of the City who had been an inmate of the City Mental Hospital, Willerby for some time ; the death occurred at the hospital.

Encephalitis Lethargica. 3 persons were notified as suffering from encephalitis lethargica, 2 of whom died. Two other deaths of post encephalitis cases were also recorded, 1 of which had not been previously notified to the Department. In none of the notified cases was there any record of vaccination prior to the attack.

Periodic re-visits are paid to all known encephalitis lethargica patients.

Appendix No. 23 on pages 207 and 208 shows the present condition of those persons who are still suffering from the after-effects of encephalitis lethargica. The appendix also includes information regarding 16 cases reported to be suffering from the after-effects of an attack of encephalitis lethargica ; none of these 16 cases had been notified to the Department in the initial stage, but the history and condition of each patient point to their having suffered from the disease.

Cerebro-Spinal Fever. 16 persons were notified as suffering from cerebro-spinal fever, 7 of whom died. In one of the fatal cases the diagnosis was revised, as on further investigation the cause of the disease was found not to be due to the organisms of cerebro-spinal fever. 8 of the notified cases were admitted to the City Hospital and 8 cases received treatment in other hospitals in the City. 4 cases were re-diagnosed after treatment in the City Hospital. One severe case was still in hospital at the end of the year ; no serious after-effect is reported in any of the 4 cases which recovered.

Acute Anterior Poliomyelitis. One case of acute anterior poliomyelitis, in a child of 18 months, was notified. The patient was treated at home, and at the end of the year it was reported to be making a good recovery. The left leg was involved, but after treatment normal function was regained.

Pneumonia. 16 cases of acute influenzal pneumonia and 263 of acute primary pneumonia were notified ; 66 of these 279 patients died. This is equivalent to a case mortality of 23·7 per cent. The total number of deaths registered during the year from all forms of pneumonia was 271. In no case was nursing assistance needed, and no call was made on the services of the Jubilee District Nurses, which are available in this respect when required.

Dysentery. 11 cases of this disease were notified during the year.

I have to thank Dr. E. F. Wilson, of Hull, for his promptitude in drawing he attention of the Department to the occurrence in his practice of a number of ases presenting symptoms of dysentery.

The outbreak was investigated by the medical and sanitary staffs of the Department and wherever possible material was collected for bacteriological examination. Samples of food, milk and water were examined with negative results. The majority of the patients gave positive results on agglutination with a bacillus of Flexner type.

The cases which were the subject of inquiry, occurred within a limited area of the City and no definite connecting link between the cases was established. Flies were numerous in the neighbourhood at the time of the occurrence, and several were obtained and examined bacteriologically with negative results.

Malaria. 5 cases of malaria were reported ; the disease had been contracted abroad in each instance. No case of induced malaria was notified during the year.

Of the general paralysis patients who had been inoculated with malaria in previous years, only 2 had adverse reports as to their present condition. One is still in the Mental Hospital and the other, whilst able to follow his employment, suffers from fits of bad temper and acts strangely at times.

Smallpox. No case of smallpox was reported during the year.

Vaccinations. The total number of vaccinations and re-vaccinations performed by the Medical Officer of Health and the Medical Staff of the Health Department under the Public Health (Smallpox Prevention) Regulations, during the year was 6 : 5 primary and 1 re-vaccination. Successful results were obtained in each case.

The Vaccination Officers report that 2,376 exemptions from vaccination were obtained during the year 1934 and 3,126 persons were vaccinated mostly by the Public Vaccinators.

The total vaccinations performed by the Public Vaccinators during 1935, in accordance with the provisions of the Vaccination Acts and Vaccination Order, 1930, are as follow :

1st Qtr.		2nd Qtr.		3rd Qtr.		4th Qtr.		Total.	
Prim.	Revacc.	Prim.	Revacc.	Prim.	Revacc.	Prim.	Revacc.	Prim.	Revacc.
694	2	636	2	736	1	588		2654	5

The return below gives information relating to the vaccinations performed during the year 1935. It is, of course, impossible to give a complete vaccination return in respect of all the births registered during this period, owing to the time allowed by the Vaccination Acts for vaccination, etc., to be carried out.

	Jan.	Feb.	Mar.	Apl.	May	Jne.	July	Aug.	Sep.	Oct.	Nov	Dec.	**Total.**
Number of cases in lists of births received from the Sub-Registrars	527	429	454	545	568	480	583	425	488	519	476	428	5922
Certificates of vaccination received	150	270	385	153	182	422	245	269	393	214	229	289	3201
Certificates of postponement owing to :—													
(*a*) Health of child	15	8	35	14	9	10	15	2	5	7	9	1	130
(*b*) Condition of house	—	—	—	—	—	—	—	—	—	—	—	—	—
(*c*) Prevalence of infectious disease	—	—	—	—	—	—	—	—	—	—	—	—	—
Statutory Declarations under Sec. 1 of the Vaccination Acts, 1907	222	181	188	168	237	186	252	199	218	233	214	189	2487
Certificates of insusceptibility or of having had Smallpox	2	2	1	2	—	1	4	5	7	6	5	2	37
Cases in which parents have removed out of the district	8	4	2	4	3	11	14	5	8	3	4	4	70
Cases not traced	4	3	4	3	6	3	8	2	2	3	2	1	41
Entries in lists sent to Public Vaccinators	242	224	187	195	237	239	293	256	234	230	230	203	2770

Appendix 24 on page 209, gives statistical information on Public Vaccination for the year 1934.

Chickenpox, etc. 2,030 cases of chickenpox were officially notified or brought to the notice of the Department during 1935. The disease was compulsorily notifiable throughout the year. All unvaccinated cases of chickenpox were visited by the Medical Officer of Health, or one of the Senior Assistants, the number of isits being 553. They also paid 77 visits to doubtful or unusual cases of infectious iseases other than chickenpox.

Influenza. Only 18 deaths from influenza were registered during 1935, ndicating a very low incidence of the disease.

The death-rate for the year was 0·06 per 1,000 of the population, compared ith 20 deaths and a rate of 0·06 for 1934.

The deaths during the past five years have been as follows :—

1931	87
1932	61
1933	187
1934	20
1935	18

It is over ten years since such a low number of deaths was recorded, *i.e.*, 9 in the year 1923.

Food Poisoning. The Kingston upon Hull Corporation Act, 1930, which came nto operation in August, 1930, provides that medical practitioners shall notify o the Medical Officer of Health all definite or suspected cases of food poisoning mongst the residents of the City on whom they may be in attendance.

During the year 1935, 4 cases of suspected food poisoning were notified. ll were of a mild character, and there was no fatal result. Enquiries were made nto the circumstances of each case, but no definite evidence as to the causal agent n any particular foodstuff was forthcoming.

Hospitals for Infectious Diseases. The total accommodation available during he year at the City Hospital was 215 beds. Plans are being submitted for further avilions in accordance with the scheme already approved by the Corporation.

Owing to the demand on the existing accommodation for the treatment of ases of diphtheria and scarlet fever, it was necessary to continue the use of the Evan Fraser Hospital for the nursing of convalescent patients.

The following table gives a summary of the cases admitted to the City Hospital nd the Evan Fraser Hospital during the year. The figures relate to the diagnoses n admission ; particulars of the cases re-diagnosed after treatment in hospital re given in the report by the Medical Superintendent on page 210.

CITY HOSPITAL AND EVAN FRASER HOSPITAL.

ADMISSIONS DURING THE YEAR, 1935.

	No. of cases admitted during the year.		No. of cases admitted during the year.
Hull—		*Hull and Goole Port Sanitary Authority's Cases*	16
Scarlet Fever	668		
Diphtheria	944		
Cerebro-spinal Fever	8	*Cases from Outside Authorities—*	
Measles	34	Scarlet Fever	24
Other Diseases	13	Diphtheria	17
		Anthrax	1
		TOTAL NUMBER OF ADMISSIONS	1725

The admissions can be classified as under :—

	1931	1932	1933	1934	1935
City cases	1,641	2,116	1,928	1,729	1,667
Hull and Goole Port Sanitary Authority's cases	12	9	15	9	16
Cases from other Authorities	53	38	63	69	42
	1,706	2,163	2,006	1,807	1,725

During 1935 the number of patients treated in the hospitals for infectious diseases shows a decrease of 82 compared with the previous year. This decrease is due to the reduction in the number of diphtheria cases admitted. There was an increase of 33 in the number of scarlet fever cases admitted.

Infectious Diseases Ambulance Service. Four motor ambulances are provided for this service. At the present time two are used for diphtheria, one for scarlet fever and one for tubercular and other infectious patients. Two vans are used in disinfection work, one for the collection of infected material and the other for its return after disinfection. There is no connection between this ambulance service and that engaged on the removal of patients to the Public Assistance Hospitals.

Bacteriological Examinations. Appendix 26, page 218, gives the City Bacteriologist's report on specimens submitted to him during the year for bacteriological or pathological examination. The specimens numbered 6,737, amongst which 3,954 were for the organisms of diphtheria and 2,737 for those of tuberculosis.

A large number of specimens was examined by the Medical Superintendent n the laboratory attached to the City Hospital and the Tuberculosis Sanatorium, Cottingham.

Dr. Adamson (Hon. Pathologist, Hull Royal Infirmary) is responsible for the pathological examinations under the Venereal Diseases scheme and for the examination of milk for tuberculosis by the biological test.

DISEASES OF SPECIAL INTEREST, INCLUDING THOSE WITH A HIGH FATALITY RATE.

Cancer. Cancer caused 470 deaths, compared with 463 in 1934 and 420 in 1933. Accurate records of the causes of death in Hull begin in 1886. In that year there were 101 deaths from cancer and 315 from tuberculosis. These represent on the population of that day, a death-rate of 0·5 per 1,000 of the population from cancer and 1·6 from tuberculosis. In 1935 there was an increase of 7 deaths from cancer compared with those registered for 1934. The total number of deaths from the same cause in 1931 was 21 less than in 1930, and in the latter year 26 below the number for 1929. With these exceptions the mortality from this disease has, apart rom slight variations, shown an upward tendency year by year. The death-rate rom cancer is now 1·3 per 1,000 and from tuberculosis 0·9. The death-rates for England and Wales are cancer, 1·6; tuberculosis, 0·7. In the last 50 years, therefore, the death-rate in Hull from cancer has increased 160 per cent., whilst that from tuberculosis has decreased by 43·75 per cent.

A table has been prepared showing the principal sites of fatal cancer; it is printed as Appendix 27, page 219.

The Local Medical Committee on Cancer, which is affiliated to the Medical Committee of the Yorkshire Council of the British Empire Cancer Campaign, meets as occasion requires.

Mrs. S. E. Eve, M.B., has continued to act as Honorary Medical Investigator to the Committee and has reported to the Ministry of Health upon the cases of cancer of the breast, womb or rectum. Since the scheme of inquiry was instituted nearly 9 years ago, 691 cases have been brought within the scope of the investigation. The patients have been treated at the following institutions:—

Hull Royal Infirmary	503
Anlaby Road Institution (Hospital)	131
Beverley Road Institution (Hospital)	54
The Lloyd Hospital, Bridlington	3
	691

Cases which go first to the Hull Royal Infirmary and are afterwards admitted to one of the Public Assistance Hospitals, are included in the Hull Royal Infirmary cases.

The site of the cancer was :—

Breast	320
Uterus	283
Rectum	88
	691

In the above 691 cases are 70 new cases in respect of which particulars were taken during 1935, giving the following information as regards treatment :—

	Breast	*Uterus*	*Rectum*
Cases operable on admission to hospital :—			
Radical operation	15	1	2
Radical operation and radium	6	1	—
Local excision and radium	4	—	—
Radium treatment	2	9	—
Deep therapy	1	1	—
Cases inoperable on admission to hospital :—			
Radium treatment	6	13	1
Colostomy	—	—	3
Deep therapy	4	—	—
Recurrent cases after radical operation elsewhere sent up for radium	1	—	—
Totals	39	25	6

Dr. Eve has had the able assistance of the Health Visitors in the work of following up previous cases.

The condition of the patients at the end of the year 1935 was as follows :—

CANCER OF THE BREAST.

Cases who had Radical Operation.	Cases who had Radiological treatment.	Neither operative nor radiological treatment.
Alive : 106	63	—
Dead : 83	56	12
189	119	12

CANCER OF THE UTERUS.

	Cases who had Radical Operation.	Cases who had Radiological treatment	Neither operative nor radiological treatment.
Alive :	18	84	—
Dead :	22	129	30
	40	213	30

CANCER OF THE RECTUM.

	Radical Operation performed.	Colostomy.	Colostomy and Radium.	Neither operative nor radiological treatment.
Alive :	6	6	4	—
Dead :	12	41	17	2
	18	47	21	2

The figures show that 41 per cent. of the patients suffering from cancer of the breast were inoperable before the patients were examined by a surgeon, and of those suffering from cancer of the uterus and rectum, the inoperable cases numbered 86 per cent. and 80 per cent. respectively. It should be mentioned here that these are all patients who have attended the Royal Infirmary, or have been admitted to a Municipal or other hospital, and that if all cases of cancer of these sites were included, the proportion of inoperable cases might be even greater, as many very old people do not consult a doctor until the disease is obviously very advanced, and the general practitioner does not think it necessary or advisable to send them on to a surgeon. Figures have been extracted showing the average interval which has elapsed between :—

(*a*) The onset of symptoms and consulting a general medical practitioner, and

(*b*) Consulting the general practitioner and admission to hospital.

The figures for the breast, the uterus and the rectum are as under :—

AVERAGE INTERVAL BETWEEN ONSET OF SYMPTOMS AND ADMISSION TO HOSPITAL DURING THE YEAR 1935.

	Onset and General Practitioner.	*General Practitioner and Hospital.*	*Total.*
Breast—			
Operable	6¼ months.	1¼ months.	7½ months.
Inoperable	5¾ months.	1½ months.	7¼ months.
Uterus—			
Operable	7½ months.	3¾ months.	11¼ months.
Inoperable	13 months.	1¼ months.	14¼ months.
Rectum—			
Operable	6 months.	½ month.	6½ months.
Inoperable	6 months.	4½ months.	10½ months.

The delay between the first seeking of medical advice and the examination by a surgeon is very often the fault of the patient, who is naturally reluctant to take a step which may lead to a surgical operation.

Radium. It is now known definitely that radium is of great value in the treatment of certain forms of cancer, particularly cancer of the womb and of the lip or tongue.

The 44 milligrammes of Hydrated Radium Bromide (23 milligrammes of element) belonging to the Corporation, are lent on request for periods of 48 hours at a time to any medical practitioner who requires it for the use of a patient in the City or neighbourhood.

During 1935 the applicators were on loan on 17 occasions for the use of 15 patients, 2 of whom had the use of it twice ; the loans in 10 instances were in respect of persons suffering from cancer.

In addition to the above there are 760 milligrammes of radium under the control of the Hull Radium Trust. This radium is available for the benefit of patients of the Hull Royal Infirmary, the Municipal and other hospitals, and approved nursing homes. A portion of this supply is kept at the Anlaby Road Institution (Hospital) in a specially constructed safe.

Bronchitis. There were 102 deaths from bronchitis, compared with 79 in 1934 and 137 in 1933. The death-rate in 1935 was 0·35 per 1,000 of the population, and the total death-rate from non-tuberculous respiratory diseases, chiefly bronchitis and pneumonia, was 1·3.

Heart Disease. This disease accounted for 790 deaths during the year, compared with 794 in 1934. The death-rate in 1935 was 2·7 per 1,000 of the population. These figures show how very serious is this cause of death, and emphasise the importance of paying ever-increasing attention to rheumatism in children and adolescents, for at these age periods the seed of heart disease in adults is often sown.

Alcholism. During the year 12 deaths were certified to have occurred from cirrhosis of the liver, and 1 from alcoholism, compared with 10 and 2 respectively, from the same causes in 1934 and 4 from cirrhosis of the liver and none from alcoholism in 1933.

TUBERCULOSIS.

TUBERCULOSIS.

The material for this section has been supplied largely by Dr. D. Diamond, the Senior Assistant Medical Officer of Health in charge of the Tuberculosis Department.

The following table shows new cases and deaths arranged in age periods. Pulmonary and Non-Pulmonary figures are given separately :—

NEW CASES AND MORTALITY.

Age Periods.	New Cases.†					Deaths.					
	Pulmonary.		Non-Pulmy.		Total.	Pulmonary.		Non-Pulmy.		Totals.	
	M.	F.	M.	F.		M.	F.	M.	F.	1935.	1934.
0—1 ...	2	—	2	2	6	1	—	—	5	6	5
1—5 ...	5	5	11	16	37	2	2	10	5	19	12
5—10 ...	5	3	16	17	41	1	1	2	4	8	4
10—15 ...	4	14	9	11	38	2	2	4	4	12	10
15—20 ..	20	19	5	8	52	7	15	2	4	28	28
20—25 ...	26	31	14	5	76	18	17	6	2	43	54
25—35 ...	47	34	8	10	99	28	28	4	3	63	52
35—45 ...	49	22	6	2	79	23	21	2	—	46	50
45—55 ...	38	14	2	3	57	32	7	1	1	41	48
55—65 ...	33	11	—	1	45	25	3	1	—	29	26
65 and over ...	6	4	—	—	10	6	3	—	1	10	6
1935 ..	235	157	73	75	540	145	99	32	29	305	—
1934 ..	254	184	70	64	572	146	111	16	22	—	295

† Primary Notifications and other new cases coming to the knowledge of the Medical Officer of Health.

The number of notified cases of pulmonary tuberculosis shows an appreciable decrease in 1935, and the total mortality shows a decrease more particularly in the female groups. The notifications and deaths in respect of non-pulmonary tuberculosis have, however, increased as compared with 1934.

For many years it has been recognised that the age period of 15—25 has not shared to the same extent as other age groups in the gradual fall in the death-rate from tuberculosis. The following table shows the number of deaths in this age group during the last 5 years, divided according to the type of tuberculosis causing death, and sub-divided according to sex :—

MORTALITY IN AGE PERIOD 15-25 DURING THE LAST FIVE YEARS.

Year.		Pulmonary.		Non-Pulmonary.		Totals.		Grand Total.
		M.	F.	M.	F.	M.	F.	
1931	...	39	49	6	1	45	50	95
1932	..	31	40	4	6	35	46	81
1933	..	34	26	7	3	41	29	70
1934		30	44	2	6	32	50	82
1935	....	25	32	8	6	33	38	71

It will be noted that the mortality in females in this age group again exceeds that of the mortality in males. This excessive mortality in the young female adult forms one of the major problems of tuberculosis. There are many factors that may contribute to this disparity of mortality rate :—

1. In the female suffering from tuberculosis this is an age when the physiological stress of maturing womanhood is a potent factor tending to lower the individual resistance.
2. The fact that in a large number of instances the infectious case of tuberculosis being nursed at home subjects the female members of the household to the risk of mass infection. The nursing, the handling of the patient, the making of beds, the sweeping and dusting of the house, are all elements of risk where any infectious case of tuberculosis is present.

Endeavours are made to keep under observation all young adults who are contacts of sputum positive cases. The more complete supervision of this group is essential. The future extension of X-Ray services, particularly the use of portable apparatus, will undoubtedly play a great part in the earlier elucidation of latent disease. It is becoming apparent that a campaign directed towards the prevention of disease in the adolescent is of prime importance in the elimination of tuberculosis.

The following table gives the deaths from all forms of tuberculosis, and the death-rate per 1,000 of the population for Hull and for England and Wales since 1930 :—

		Hull.		England & Wales.	
Year.		Deaths.	Death-rate.	Deaths.	Death-rate.
1930	....	394	1·29	35,567	0·90
1931	....	426	1·35	35,829	0·90
1932	....	319	1·01	33,648	0·83
1933	.	348	1·09	33,248	0·82
1934	....	295	0·92	30,719	0·76
1935		305	0·95	29,183	0·71

The next table gives the figures for pulmonary and non-pulmonary tuberculosis in 1933, 1934 and 1935, and 10, 20 and 30 years ago :—

	HULL DEATHS.			DEATH RATE PER 1,000 OF THE POPULATION.					
				HULL.			ENGLAND AND WALES.		
Year.	Pulmonary.	Non-Pulmonary.	Total.	Pulmonary.	Non-Pulmonary.	Total.	Pulmonary.	Non-Pulmonary.	Total.
1935	244	61	305	0·76	0·19	0·95	0·60	0·11	0·71
1934	257	38	295	0·80	0·12	0·92	0·63	0·13	0·76
1933	287	61	348	0·90	0·19	1·09	0·69	0·13	0·82
1925	314	62	376	1·06	0·20	1·26	0·79	0.23	1·02
*1915	367	117	484	1·26	0·40	1·66	1.05	0·39	1·44
1905	251	92	343	1.00	0·33	1·33	1·15	0·49	1·64

* The deaths for 1915 relate to Civilians only.

The above table shows that the death-rate for pulmonary tuberculosis has continued to decrease, but there has been an increase in the death-rate for non-pulmonary tuberculosis. This has raised the total mortality rate as compared with 1934. The increase in the death-rate of non-pulmonary tuberculosis is mainly attributable to the larger number of cases notified as tuberculous meningitis.

Tuberculous Meningitis. The deaths from tuberculous meningitis numbered 36 in 1935, 20 in 1934, and 23 in 1933.

These figures call for very careful comment. An analysis will show the incidence of primary tuberculous meningitis in a truer perspective. All the deaths of the 36 cases notified as tuberculous meningitis took place in hospitals and institutions. Representations were made to the medical staffs concerned to notify cases of tuberculous meningitis as soon as a diagnosis was made. Of the 36 cases only 10 were diagnosed prior to death. In those not investigated till after death the surmise that the case was one of tuberculous meningitis could only be arrived at after a full investigation into the clinical history and the result of the examination of the cerebro-spinal fluid. It was found that, of the 36 cases, the diagnosis could only be confirmed in 24. Of the remainder, the diagnosis in 3 cases was considered not to be due to tuberculous meningitis, and in the others the disease was regarded as a terminal infection in cases where tuberculosis had already existed in other parts of the body. One case was primarily notified as pulmonary tuberculosis ; 2 bone and joint tuberculosis ; 1 tuberculous kidney, and 2 generalised miliary infection. In 3 cases the information first reached the Department through the death returns of the Registrar. Each case of Tuberculous meningitis was investigated in an endeavour to trace the original source of infection.

Recent research has shown that approximately 75 per cent. of primary tuberculous meningitis in children is caused through a human source of infection, and in the other 25 per cent. the infection has been attributed to the bovine bacillus. In the cases investigated, difficulties were again found when endeavouring to impress upon parents whose children had died of tuberculous meningitis, the importance of contacts (both children and adults) being examined in order to eliminate the possibility of latent disease. An X-ray of the chest was taken in each adult case clinically investigated. In 11 of these families the adults refused to submit to any form of examination or X-ray investigation.

In visits paid to the homes by Health Visitors and Tuberculosis Officers, efforts were made to persuade the parents to visit the Tuberculosis Dispensary.

The importance of this investigation in the prevention of primary tuberculous meningitis cannot be overestimated. It can be exemplified in a case which occurred during the year where the family consisted of the parents and 2 young children and where a child aged 11 died of tuberculous meningitis in June and the other aged 2 died of primary tuberculous meningitis in October. Both the parents refused to submit to either clinical or X-ray examination.

Of the cases investigated, it was found that in 3 there was a history of pulmonary tuberculosis occurring in one of the parents in an active form, and in two others clinical and X-ray examination of one parent showed evidence of latent disease. Thus, in the 13 cases of tuberculous meningitis investigated, the possibility of a human source of infection was found in 5 of the cases.

With a view to ascertaining whether there might be bovine infection, enquiries were made and it was found that in 8 of the cases the supply was tinned milk; in 13, the supply was from a dairy, and in 11 the supply was casual. The dairy milk supply was mostly pasteurised. The difficulties of tracing a casual and irregular source of milk supply are obvious.

Notifications. The numbers of notifications sent to the Medical Officer of Health each year since 1930, are given below:—

	Pulmonary.	*Non-Pulmonary.*	*Total.*
1930	491	135	626
1931	556	153	709
1932	489	150	639
1933	496	130	626
1934	405	109	514
1935	369	123	492

No primary notification of tuberculosis from the School Medical Department was received in 1935, compared with 1 in 1934 and 1 in 1933.

Dispensary System. Unless arrangements are made for receiving treatment elsewhere, the notified cases attend at one of the two dispensaries.

Of the 492 cases notified, a number were moribund at the time of notification, whilst others were either removed to institutions for treatment or remained under the care of their own medical attendants. The balance, numbering 445, attended the dispensaries. Besides these, 1,177 suspected cases or contacts attended the dispensaries, making 1,622 new patients who came for diagnosis or to have the appropriate treatment arranged ; the corresponding number for 1934 was 1,603.

Of the total for 1935, 388 were diagnosed as cases of definite tuberculosis, 1,212 were considered not to be suffering from active tuberculosis, and 22 were kept under observation. Of the 22 cases still under observation at the end of the year, 7 have been found to be tuberculous and 15 to be non-tuberculous.

Sources of the New Cases. 801 were contacts of other cases, 597 were sent by private practitioners or from the General Dispensary, 203 came from Municipal Institutions, *e.g.*, the School Medical or the Maternity and Child Welfare Department, and 21 from other sources, *e.g.*, the Ministry of Pensions, or from Medical Officers connected with Factory Welfare Schemes.

Examination of Contacts. One of the main objects of the dispensary system is to bring cases under treatment at a stage sufficiently early to warrant the hope of arresting the disease. To this end, the Medical Officers and the tuberculosis nurses use every effort to persuade the family contacts to be medically examined.

The insidious nature of the onset of the disease and the potential dangers of its quiet spread make it imperative to utilise all the forces at our disposal in its detection. In children, particularly, physical examination of the chest is not sufficient in itself definitely to determine the presence or absence of the disease. No child should be removed from clinical observation until the fullest investigation has been carried out. Such investigation includes the tuberculin test and X-ray examination of the chest.

Mantoux Test. The intradermal tuberculin test has a definite sphere of utility in the examination of contacts. For practical purposes this has been mainly confined to child contacts of sputum positive cases, as experience has shown that the value of the test lies chiefly in this group. It is realised that a positive reaction, while in itself not proving the presence of tuberculous disease, is sufficient evidence of tuberculous infection to warrant the further intensive investigation of those children showing such reaction. This group of positive reactors are X-rayed, and if, on clinical grounds and X-ray evidence, no active disease is discovered, they are re-examined at six-monthly intervals. The negative reactors are re-tested at 6-monthly intervals. It is hoped to keep a constant check on these contacts, at least during their school life. Grateful acknowledgment must be made for the ready help and sympathetic co-operation of the Maternity and Child Welfare and School Medical Departments in this work.

A preliminary investigation into the value of tuberculin testing in Dispensary work was carried out during the year and the following is a summary of the results :

The Mantoux Test in Dispensary Work. The principle of the tuberculin test in the diagnosis of tuberculosis is based on the fact that persons who at any time have been infected with the tubercle bacillus, give a reaction when injected with the test dose of tuberculin.

The reaction merely demonstrates the presence of infection and not necessarily clinical disease. The practical value of the test has been confined, in recent years, chiefly to the diagnosis of infection in young children, as it is found that the majority of the population give a positive reaction on reaching adult life.

Technique. The skin of the forearm is cleansed with ether and 0·1 c.c. of 1 in 1,000 Old Tuberculin injected intradermally into the forearm. A reading is taken after forty-eight hours. The minimum admitted as a positive reaction should be a well-defined erythematous area 10 mms. in diameter and raised above the surrounding surface.

For practical purposes the dilution of the tuberculin used was limited to 1 in 1,000, because experience has shown that there is an approximate error of less than 2 per cent. when the test is limited to this dilution. Through the courtesy of Messrs. Burroughs, Wellcome & Co., we were enabled to use a trial supply of a new Tuberculin known as "Small Fraction Tuberculo-Protein." The value of the new product lies in the fact that it has better keeping quality, thus rendering frequent and fresh dilutions unnecessary. The definition of reaction is also clearer, and one can dispense with a control injection. This new tuberculin, at the time the test was carried out, was not issued commercially, so that most of the tests made were with Old Tuberculin.

During the year, 375 children were tested. Before any definite conclusions can be reached as to the value of the tuberculin test in these child contacts, they will have to be kept under observation for several years. Certain interesting results are apparent, however, from the numbers tested so far. An analysis of the cases shows that roughly a third were sputum positive contacts, and a third were sputum negative contacts. An interesting comparison, therefore, of the value of the test can be made, and the following table will demonstrate this :—

	Total.	Result.		Percentage of Positive Reactors.
		Positive.	Negative.	
Sputum positive contacts	127	88	39	70%
Sputum negative contacts	123	37	86	30%

It is clearly shown from this table that the incidence of tuberculous infection amongst contacts of open cases of tuberculosis, is more than twice as great as amongst non-infectious pulmonary or non-pulmonary cases. In each case where there was a positive result to the test, the child was X-rayed, and out of a total of 125 positive reactors, the X-ray findings were sufficiently suspicious in 16 cases to warrant observation in the Sanatorium.

It has been shown also that the Mantoux test is extremely useful in those children referred, either from a clinic or by private doctor, on account of some chest signs or symptoms. The value in this group is the strong confirmatory evidence of non-tuberculosis when a negative mantoux reaction is obtained in children who are suffering from various stages of respiratory catarrh. The further value of the Mantoux test lies in the possibility of being able to elucidate an approximate time when a contact of an infectious case of tuberculosis becomes first infected through such contact. With this end in view, every contact of a sputum positive case of tuberculosis who, in the first test gives a negative result, is subsequently retested at regular intervals.

The tuberculin test is of value also in cases where a non-contact child is referred by a private doctor or from a clinic and who, on testing, gives a positive result. It may be possible by examining the remaining members of the family, particularly the adults, to find unsuspected cases of latent disease, from whom the child has been infected. Our investigations with the tuberculin test are limited at present to children of school age, because we are enabled to keep some check on these children during their school life. The greatest and most urgent problem, however, is the age group 15–25, when the disease displays its most virulent form, both in the acuteness of its onset and the rapidity of its spread. The regular tuberculin testing in this age group undoubtedly will enable us to check the ravages of the disease in the young adolescent if carried out methodically and in conjunction with X-ray investigation of the positive reactors.

Again and again one comes across cases where a young adult contact of an infectious case of pulmonary tuberculosis, shows, on medical examination, no clinical signs or symptoms of tuberculosis, yet a few months later returns with clinical symptoms, physical signs and X-ray examination revealing advanced disease. In this group the disease is undoubtedly the result of a primary infection on virgin soil and is comparable to the virulent infection seen amongst native races when first exposed to infectious disease.

We have no doubt that routine tuberculin testing and X-ray investigations of the chest in the young adult group and the institution of the necessary preventive measures, will enable us to solve the problem of acute tuberculosis amongst adolescents.

The following table shows the number of contacts examined by the Medical Officers of the Tuberculosis Department during the last 5 years :

Year.	*No. of Contacts.*
1931	992
1932	1115
1933	1416
1934	761
1935	801

Of the 801 contacts in 1935, 3 were found to be definitely tuberculous at the first examination and 12 later ; 409 were considered to be non-tuberculous at the first examination and 368 subsequently ; the other 9 were amongst those under observation at the end of the year.

The percentage of definite cases of tuberculosis found in routine contact examination is 1·9. This compares favourably with figures reported from comparable areas where they have been quoted as high as 6 and 7 per cent. This figure for Hull is noteworthy, as definite stress is laid on the examination of contacts of sputum positive cases, where the risk of infection is at its maximum.

Of the new cases sent by practitioners, 171 were diagnosed definitely before they came to the dispensaries, and 426 were sent for diagnosis. Of these, 118 were diagnosed as tuberculous and 308 as non-tuberculous.

In 1935, 71·3 per cent. of the new cases referred by general practitioners were sent for diagnosis, as compared with 62·3 per cent. in 1934 It is the policy of the Tuberculosis Department to encourage general practitioners to use the Department more and more as a centre for diagnosis, instead of merely as a gateway to institutional treatment.

A large proportion of the cases referred to the dispensary is found to be suffering from non-tuberculous conditions. Affections of the respiratory tract such as asthma, bronchiectasis, and new growth of the lung, necessitate full and early investigation. In the extension of the work of investigation of such cases lies the future usefulness of the Tuberculosis Dispensary. The alteration in the title of the dispensary to that of " Chest Clinic " perhaps would encourage the earlier attendance of cases of tuberculosis as well as that of patients suffering from other chest ailments, and the primary function of the dispensary as a diagnostic centre for diseases of the respiratory system would be retained.

In the following table the 388 cases diagnosed as tuberculous at the end of the year are classified according to age, sex and whether pulmonary or non-pulmonary :—

Age Periods	0–10	10–20	20–30	30–40	40–50	50 *and over*	*Totals.* 1935.	1934.
PULMONARY								
Males	3	23	37	38	26	46	173	213
Females	6	22	40	23	11	18	120	138
NON-PULMONARY								
Males	15	3	9	6	2	—	35	54
Females	26	19	7	4	3	1	60	35
1935	50	67	93	71	42	65	388	—
1934	58	73	122	73	60	54	—	440

Stages of the Disease. The 388 definite cases were classified as follows :—

PULMONARY—		
Class T.B. minus	Cure or definite improvement	78
Class T.B. plus-group 1.	reasonably to be expected.	30
Class T.B. plus-group 2.	Doubtful if curable, but improvable	157
Class T.B. plus-group 3.	Neither curable nor improvable	28
NON-PULMONARY		95
		388

The numbers of cases on the Dispensary and Notification Registers during recent years have been :—

Year.	New cases notified.	Number on Notification Register, 31st Dec.	Number on Dispensary Register, 31st Dec.	Examinations.	Total home visits by Tuberculosis Nurses
1930	626	2,084	1,381	3,496	9,615
1931	709	1,409	1,310	3,650	9,811
1932	639	1,550	1,424	5,068	12,540
1933	626	1,485	1,419	7,653	13,306
1934	514	1,440	1,446	7,131	12 243
1935	492	1,466	1,432	7,769	11,550

Visits by Tuberculosis Nurses. The Tuberculosis Nurses paid 11,550 visits to the homes of tuberculous patients, as compared with 12,243 in 1934, 13,306 in 1933 and 12,540 in 1932. Of the visits paid in 1935, 461 were made in accordance with the requirements of the Public Health (Tuberculosis) Regulations, 1930.

Delay in Notification. As a comment on delayed notifications, the following table is instructive. The same state of affairs prevails all over the country :—

Year.	Deaths from Pulmonary Tuberculosis.	Not notified until disease far advanced.		
		Never notified or not till after death.	Notified within three months of death.	Total.
1930	321	39	119	158
1931	358	75	137	212
1932	253	70	85	155
1933	287	47	117	164
1934	257	49	95	144
1935	244	41	80	121

In accordance with Circular 1417 of the Ministry of Health, there is appended for 1935 the ratio of non-notified tuberculosis deaths to the total tuberculosis deaths. The total deaths from tuberculosis for 1935 was 305, and the number not notified was 41. The ratio was therefore 1 to 7.

The 41 cases comprise 22 deaths from pulmonary tuberculosis and 19 deaths from non-pulmonary tuberculosis.

The 19 deaths from non-pulmonary tuberculosis include 17 cases of tuberculous meningitis and 2 cases of tuberculous disease of the abdomen. Of this group of 19 cases, 18 were treated in institutions and hospitals, and from the nature of the disease and the part affected, the diagnosis presented difficulties and was only confirmed in certain instances on post-mortem examination. Of the 22 deaths from pulmonary tuberculosis, 14 were certified from institutions and 8 by general practitioners.

The efficiency of notification of tuberculosis in this area is fairly satisfactory. In all cases where knowledge of the disease is obtained only from the mortality returns, the practitioners concerned are circularised by the Medical Officer of Health, and informed of the need for compliance with the requirements of the Public Health (Tuberculosis) Regulations, and asked to notify all cases of tuberculosis as soon as possible after making a definite diagnosis. This procedure has been found satisfactory, and no further action has been necessary.

X-ray Examinations. During 1935, 1,166 X-ray examinations were made in connection with dispensary work, compared with 1,215 in 1934, 931 in 1933 and 717 in 1932. No examination of a patient complaining of symptoms referable to the chest, is complete without an X-ray investigation.

A good X-ray film often will reveal disease when otherwise it would have been unsuspected. We have made use in difficult cases of lipiodol investigation. This has been made possible through the ever-ready and efficient co-operation of the Medical Superintendents and Staffs of the Municipal Hospitals.

Sputum Examinations. Of 1,389 specimens of sputum sent for examination from the dispensaries, 424 were positive and 965 negative.

Of the many methods used in the diagnosis of pulmonary tuberculosis, the examination of sputum ranks as one of the most important. While it is true that a negative result is of no value, it is equally true that a positive sputum is the most definite evidence obtainable that tuberculosis is present.

In cases where, after the sputum examination, the diagnosis has remained in doubt, we have been enabled, through the courtesy and help of the Medical Superintendent of the City Hospital, to make use of a biological examination by means of animal inoculation.

The number of specimens of sputum examined by the City Bacteriologist during the year was 2,705 ; 738 were positive and 1,967 were negative. These figures include specimens sent by private practitioners and from the After-Care Colony.

Isolation of Infectious Cases. The Public Health Act, 1925, Section 62, provides for the compulsory removal to hospital of infectious cases of pulmonary tuberculosis who cannot be isolated properly at home. No legal action has been necessary under this section.

Houses for Tuberculous Patients. A scheme for the re-housing of the families of tuberculous patients was described at length in the Annual Report for 1931. This scheme provides for the tenancy of 30 houses with assistance in the payment of rent to suitable families. The scheme continues in operation.

There is already evidence of the beneficial effect both physical and psychological derived by the patient and his family from this progressive public health measure—the re-housing of the tuberculous patient.

Shelters. The Corporation own 12 open-air shelters which are loaned to patients (free of charge) when there is a garden or a back-yard available and suitable for the accommodation of a shelter. At the end of the year 6 shelters were in use.

The Public Health (*Prevention of Tuberculosis*) *Regulations*, 1925. No action was necessary under these regulations, which empower the Authority to prohibit an infectious case of tuberculosis from engaging in the milk trade.

Orthopædic Clinic. Twelve new patients were examined and reported upon. The number of attendances for examination and re-examination was 57. The following treatments were given :—

Massage—11 attendances
Electrical—1 attendance
Remedial exercises—7 attendances
Other forms—2 attendances

Light Treatment. Tuberculous patients in need of light treatment are referred to the Maternity and Child Welfare Clinic ; 55 were so referred during 1935 and they made 1,862 attendances.

The following table gives the age grouping of the patients, the site of the lesion, and the result.

LIGHT TREATMENT.

Site of Lesion.	Condition.	Age periods.											
		2–5		5–10		10–15		15–20		Over 20		Total.	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Glands	Arrested	—	—	—	1	—	1	—	—	—	—	—	2
	Quiescent	1	—	5	2	1	2	—	2	—	2	7	8
	Improved	1	1	1	3	3	2	—	1	—	—	5	7
	Not improved	—	—	—	—	—	—	—	—	—	—	—	—
Skin .... (Lupus)	Arrested	—	—	—	—	1	—	—	—	—	—	1	—
	Quiescent	—	—	—	—	—	—	—	—	—	—	—	—
	Improved	—	—	2	—	—	—	1	1	2	2	5	3
	Not Improved	—	—	—	—	—	—	—	—	—	—	—	—
Bones and Joints (Sinuses)	Arrested	—	—	—	—	—	—	—	—	—	—	—	—
	Quiescent	—	—	—	—	—	—	2	—	2	—	4	—
	Improved	—	—	—	1	1	—	—	—	1	—	2	1
	Not improved ...	—	—	—	—	—	—	—	—	—	—	—	—
Abdomen .	Arrested	—	—	1	—	—	—	—	—	—	—	1	—
	Quiescent	—	—	—	—	—	—	—	—	—	1	—	1
	Improved ...	—	—	—	1	—	—	—	—	1	1	1	2
	Not improved	—	—	—	—	—	—	1	—	—	1	1	1
General	Arrested	—	—	—	—	—	1	—	—	—	—	—	1
	Quiescent	—	—	—	—	—	—	—	1	—	—	—	1
	Improved ...	—	—	1	—	—	—	—	—	—	—	1	—
	Not improved ..	—	—	—	—	—	—	—	—	—	—	—	—
	Total	2	1	10	8	6	6	4	5	6	7	28	27

Dental Treatment. The following figures relate to Dental Treatment received by 13 tuberculous patients during 1935 at school clinics :—

Number of cases treated	13
Number of attendances	68
Number of extractions—	
(*a*) Temporary teeth	2
(*b*) Permanent teeth	104
Number of fillings—	
(*a*) Temporary teeth	—
(*b*) Permanent teeth	—
Other Operations	8

Dr. H. M. Leete has been responsible for the following section dealing with the Sanatorium :—

The Sanatorium, Cottingham. Dr. H. M. Leete continued as Medical Superintendent throughout the year. Dr. P. R. Fanning resigned his post as Resident Medical Officer in November 1935 after nearly seven years' valuable work in this capacity at the Sanatorium. He was succeeded by Dr. A. C. Morrison, Assistant Tuberculosis Officer in the City of Hull, who was at the same time appointed Deputy Medical Superintendent of the City Hospital and Sanatorium group.

On the 18th October, 1935, a new 38-bed ward—Ward 3—was formally opened by the Chairman of the Tuberculosis and Hospitals Sub-Committee (Councillor R. E. Smith). The opening of this ward was of the greatest value not only because of the provision of the additional beds but because it enabled a re-distribution of beds to be effected in the Sanatorium as a whole. It was thus possible to provide a separate ward for non-infectious cases among children. It was also possible to abandon the use of some 15 wooden shelters, which, while valuable as temporary accommodation in the past, had many disadvantages and had indeed reached the end of their useful life.

Patients were not admitted to the new ward until the end of the year and particulars of the use to which the accommodation was put and further details as to the re-distribution referred to above will be given in the report for 1936.

The Sanatorium continues to deal with all types of tuberculosis and the indications for treatment and length of stay which previously have been detailed have guided the medical staff during the current year.

A new X-ray apparatus was provided and came into use in August. This is a powerful installation employing a four-valve rectified transformer unit which enables satisfactory chest radiographs to be taken in one-tenth of a second. Ample screening facilities (which were not obtainable with the old apparatus) are now available and these put the control of pneumothorax cases on a much more satisfactory basis.

In suitable cases, the use of collapse therapy has been continued as part of the routine treatment in the sanatorium, and a number of "out-patients" (12 during the year, receiving some 105 treatments) are attending for pneumothorax refills. Some of these were induced at the sanatorium and are well enough to be at work, while others have had their early treatment elsewhere and are making use of the sanatorium for the continuation of their treatment, Cottingham being the only local centre where special treatment of this kind is available as a routine.

Other activities of the sanatorium should be referred to. Craft teaching has been continued with classes meeting regularly and work being done on the wards. Full use has been made of the recreation hut, where numerous entertainments have been given.

At the beginning of 1935 there were 124 patients in residence; 240 were admitted during the year and 243 were discharged, leaving 121 under treatment on the 31st December. The number admitted during 1934 was 283.

There were 4 cases under observation in the sanatorium on the 1st January and 35 were admitted during the year. Of these, 3 adults and 6 children were found to be suffering from tuberculosis and were admitted for treatment, while 8 adults and 16 children were found not to be suffering from tuberculosis, and were discharged. One child, a positive case of tuberculosis, was discharged at the parents' request. One adult left and 2 children were removed by parents before the observation period was completed or the diagnosis was confirmed. Two children were still in the Sanatorium under observation at the end of the year.

Particulars of the age and sex of the patients, the extent of the disease, average length of stay and condition on discharge will be found in Appendix 28 (pages 220 and 221).

Consultants. Mr. Blair visited the Sanatorium as Orthopædic Surgeon and examined 23 cases submitted for his opinion, and Mr. Simpson dealt with the special Ear, Nose and Throat work, the number of his examinations being 123.

Pneumothorax Treatment. Number of inductions, 5; 148 refills and 2 gas replacements were given during the year.

X Ray Examinations. These numbered 150, in which 156 films were taken, including 2 for members of the City Hospital staff.

Sputum Examinations. 1,329 specimens were examined at the Sanatorium. Of these, 620 were found to be positive (46·7 per cent.) and 709 negative.

Dental Treatment. The dental surgeons paid 30 visits to the Sanatorium and 351 cases were seen. The work done included 214 extractions, 99 fillings, 51 dressings and 13 scalings.

The Sanatorium School. Since it was opened in 1924, 1,407 children have passed through the school. During 1935 23 boys and 14 girls attended, making a total of 37 children. The ages of the children varied from 3 to 15 years, and the average daily attendance was 33·3. An average of 6 recumbent cases received instruction on the wards each day.

After Careers of Sanatorium School Children. All children who have attended the Sanatorium School are kept under observation, as far as possible, by the Tuberculosis Department.

During the last 9 years, 1,084 children have left the Sanatorium School. The total admissions to the school are in excess of this figure because many children have been treated and taught simultaneously at the Sanatorium School during several successive periods.

Appendix 30, page 232, gives an analysis of these figures.

Yorkshire Children's Orthopædic Hospital, Kirbymoorside. The Health and Public Assistance Committee has at its disposal 11 beds at this hospital for the treatment of children suffering from tuberculous bones and joints.

The following cases were treated during the year :—

AGE	0–5					5–15					TOTAL
LESION	Knee	Foot	Hip Joint	Spine	Hands	Knee	Foot	Hip Joint	Spine	Hands	
In Institution 1st Jan., 1935	2	—	1	1	—	1	—	4	1	—	10
Admitted during 1935	—	—	—	1	—	—	—	1	1	—	3
Totals	2	—	1	2	—	1	—	5	2	—	13
Discharged during 1935	2	—	—	1	—	—	—	2	—	—	5
Remaining in 31st Dec., 1935	—	—	1	1	—	1	—	3	2	—	8

The following table gives, in summary form, the present condition of those patients who have been discharged from Kirbymoorside from the 1st January, 1926, to the 31st December, 1935, after receiving treatment there:

AGE	0–5					5–15					TOTAL
Condition at end of 1935	Knee	Foot	Hip Joint	Spine	Hands	Knee	Foot	Hip Joint	Spine	Hands	
Arrested ...	1	—	—	2	—	2	1	6	4	—	16
Quiescent	1	—	—	—	—	1	—	2		—	4
Improved	—	—	—	—	—	—	—	—	—	—	—
Still Active	—	—	—	—	—	2	—	1	1	—	4
Lost sight of	—	—	—	1	—	1	1	—	2	—	5
Recovered	1	—	1	—	1	11	—	3	3	—	20
Died	—	—	—	3	—	—	—	2	1	—	6
Total	3	—	1	6	1	17	2	14	11	—	55

The average stay of patients discharged during 1935 was 26 months.

After-Care and Provision of Extra Nourishment. The after-care of the tuberculous patient is carried out in Hull by a Voluntary organisation which meets weekly. Close contact with the Local Authority is maintained by the inclusion on the After-Care Committee of representatives from the Hull Corporation and of the Tuberculosis Officer as medical adviser.

Cases are referred by the Tuberculosis Officer and investigations into the home conditions of the patients are carried out by a nurse from the Tuberculosis Department of the Corporation. Suitable applicants receive extra nourishment such as milk, eggs, butter, etc. Many of these are ex-sanatorium patients who, on economic grounds, have difficulty in securing an adequate diet at home.

So far as extra nourishment is concerned, however, the After-Care Committee deal only with patients whose income is not derived from Public Assistance. Where the income is obtained from out-relief and where, on medical grounds, it is felt that the provision of extra nourishment would be of material benefit, the Tuberculosis Officer provides a medical certificate to the Out-Relief Committee. This committee then makes the necessary grant towards the provision of extra nourishment.

Cases where the income is derived through the Unemployment Assistance Board are, on the recommendation of the Tuberculosis Officer, similarly dealt with by that Authority.

Therefore, so far as Hull is concerned, adequate provision is made, in each case of tuberculosis, for the supply of extra nourishment.

It is felt, however, that a Tuberculosis After-Care Committee should not confine itself to the provision of extra nourishment only. Both the scope and outlook of the Committee gradually are being extended into various useful channels. The principles underlying the work of an organisation devoted to the after-care of the tuberculous patient should be these :—

1. Cases of tuberculosis cannot be dealt with merely as isolated units. It is axiomatic in dealing with tuberculosis that the whole family of the patient concerned should be considered as an entity.

2. So far as the individual patient is concerned, efforts must be made to place him under such conditions that the benefits he has derived from treatment, whether at home or in an institution, should not be negatived by any domestic or economic worries.

3. Where the disease has been arrested and the patient restored to normal health, his rehabilitation as a useful member of society must be accomplished speedily.

At present, these are undoubtedly ideals, but they are ideals possible of attainment.

Besides helping cases during the year with rent and clothing, the Committee continued to send suitable children for a few weeks' holiday near the coast. This has proved of inestimable value, as the children are mainly those for whom a holiday away from home is a novelty.

The benefits derived by removal of the children even for a short time from poor home surroundings or from open tuberculous infection, would justify the provision of a permanent holiday home for them.

Motor Watching. This enterprise was carried on successfully, and during the year has given permanent employment to 30 men.

After-Care Colony. 16 colonists were in residence at the After-Care Colony at the beginning of the year ; 17 men were admitted and 20 were discharged during the year, leaving 13 in residence at the end of the year.

The results of treatment were: quiescent, 13; and not quiescent, 7.

There was one patient from the area of the East Riding County Council whose maintenance was paid for by that Authority. All the others were Hull patients, and the cost of their maintenance was borne by the Health and Public Assistance Committee.

VENEREAL DISEASES.

VENEREAL DISEASES.

The information contained in this section has been supplied by Dr. Edward Harrison, Senior Clinical Medical Officer of the Mill Street Clinic.

The following table gives particulars of the new cases and attendances for the years 1929 to 1935 :—

MALES.

	New Cases.						Attendances.	
Year.	Total.	Syphilis.	Gonorrhœa.	Other Venereal Disease.	Not Venereal Disease.	Total.	At Medical Sessions.	For Intermediate treatment.
1929	1414	236	638	97	443	27244	12729	14515
1930	1392	294	635	110	353	30361	13442	16919
1931	1074	137	518	118	301	27733	12853	14880
1932	1026	138	472	103	313	26684	12306	14378
1933	917	129	413	73	302	23976	11157	12819
1934	1135	154	543	72	366	25283	12498	12785
1935	1060	161	525	83	291	26458	12753	13705

FEMALES.

1929	295	60	31	—	204	9913	7437	2476
1930	248	69	106	—	73	11338	7761	3577
1931	257	85	94	—	78	10524	7004	3520
1932	251	70	134	2	45	9687	6643	3044
1933	307	66	206	—	35	10836	6757	4079
1934	345	92	94	1	158	11246	7708	3538
1935	236	76	78		82	9837	6948	2889

Comparing the total attendances for 1934 and 1935, those of men show an increase of 4·6 per cent. and of women a decrease of 12·5 per cent., whilst there has been an increase of 7·2 per cent. in the number of male attendances for intermediate treatment, and an increase of 2·0 per cent. in the attendances at the medical sessions. In the case of women, there has been a decrease of 18·3 per cent. in the attendances for intermediate treatment, and a decrease of 9·8 per cent. in the attendances at the medical sessions. The attendance of new cases in men shows a decrease of 6·6 per cent. and in women a decrease of 31·6 per cent.

Sixteen medical sessions were held each week throughout the year. Two of these are special sessions intended solely for women and children who are sent the Clinic from the Maternity and Child Welfare Centres. In a few cases, where omen patients have expressed the desire to see a woman doctor, they also have een allowed to attend during these special sessions.

Forty-two male cases of Syphilis ceased to attend before completing the *rst* course of treatment ; the total number of male syphilis cases treated during he year was 474.

Of the 56 syphilis male primary cases (Appendix 31), there were 25 positive pirochætes : thus :—

18 with negative W.R.
1 slightly positive W.R.
6 positive W.R.

25

Eighteen of the cases, or 72 per cent., had spirochætes before positive asserman reaction.

Seven hundred and sixty-six persons were still under treatment or observation t the end of the year.

Congenital Syphilis. 24 new cases of congenital syphilis came under treatment uring the year. Treatment is specially important in these cases in order to revent the blindness, deafness or insanity which may ensue.

Diathermy Treatment. 233 treatments were given during the year.

Free Supply of Arsenobenzene Compounds. The names of 27 medical prac-itioners are on the list to receive free supplies of arsenobenzene compounds. leven applied for supplies during the year, and 296 doses were issued. In dition, 190 doses were issued for use in the Hull Royal Infirmary, 960 in the everley Road Hospital, 58 in the Anlaby Road Hospital, and 1,154 in the Special ut-Patient Department of the Hull Royal Infirmary.

Pathological Examinations. The extent to which medical practitioners availed hemselves of the facilities provided for pathological examinations is shown in he subjoined statement, which also gives particulars of specimens sent from nstitutions such as the Hull Royal Infirmary, the Victoria Children's Hospital, nd the Anlaby Road and the Beverley Road Hospitals, and from the Clinic.

PATHOLOGICAL EXAMINATIONS.

	Wassermann's.	Gonococci.	Spirochœtes.	Other.	Total.	
					1935.	1934.
From Private Medical Practitioners ...	200	15	1	—	216	273
From Public Institutions	2667	566	—	—	3233	2832
From the Venereal Diseases Clinic	1372	1601	105	6	3084	3282
Totals 1935	4239	2182	106	6	6533	—
1934	4292	2008	71	16	—	6387

Detailed particulars of the work done at or in connection with the Clinic will be found in Appendix 31 (pages 233 to 237).

To enable Port Sanitary Officers, when inspecting ships, to furnish a supply of notices for the crews, stating the address of the treatment centre for Venereal Diseases and the hours of the Clinics, cards are printed in the languages of the 11 different countries from which the greater number of seamen come who frequent the port. For the translations on the cards, the Department is indebted to the various Consuls.

MATERNITY AND CHILD WELFARE.

MATERNITY AND CHILD WELFARE.

Most of the material for this section has been supplied by Dr. Helen Standring, the Senior Assistant Medical Officer of Health in charge of the Maternity and Child Welfare Department.

Maternal Deaths. The number of maternal deaths which occurred during the year was 15, compared with 30 in 1934, and 33 in 1933.

Five of the 15 deaths were due to puerperal sepsis, 1 of them following abortion, and 10 to accidents of pregnancy. There was 1 death of a mother for every 411 births. The proportion per 1,000 live births in 1935 was 2·5 compared with 5·3 per 1,000 in 1934. The figures per 1,000 total births were 2·4 in 1935, as against 5·1 in 1934.

Of the deaths from accidents of pregnancy, 3 were due to pulmonary embolism, 1 to cerebral embolism, 3 to toxæmia of pregnancy, 1 to ante-partum hæmorrhage, 1 to post-partum hæmorrhage, and 1 to obstetric shock.

There were 5 other deaths associated with pregnancy; 1 was due to lobar pneumonia, 1 to cardiac failure and fatty heart, 2 to uræmia and chronic nephritis, and 1 to coma and chronic nephritis.

This gives a death-rate per 1,000 births in women not classed as from "pregnancy and child-bearing," but returned as "associated therewith," of 0·84, compared with 0·85 in 1934, and 2·1 in 1933.

Of the maternal deaths 5 patients attended the Municipal Ante-Natal Clinic.

Enquiry forms, which are confidential, were completed for 11 cases during 1935 and forwarded to the Maternal Mortality Committee of the Ministry of Health.

ORTALITY OF WOMEN IN CHILDBIRTH DISTINGUISHING SEPTIC AND OTHER CAUSES, FOR THE YEARS 1891 TO 1935.

	Rate per 1,000 (live and still) Births.					
	HULL.			ENGLAND AND WALES		
Year	Sepsis.	Other Causes.	Total	Sepsis	Other Causes.	Total
1–95	1·0	2·7	3·7	2·60	2·89	5·49
6–1900	0·6	2·0	2·6	2·12	2·57	4·69
1–05	1·1	3·0	4·1	1·95	2·32	4·27
6–10	1·0	2·6	3·6	1·56	2·18	3·74
1–15	1·2	2·5	3·7	1·50	2·31	3·81
6–20	1·1	3·5	4·6	1·59	2·29	3·88
21–25	1·2	2·9	4·1	1·40	2·50	3·99
26–30	1·8	2·3	4·1	1·74	2·54	4·28
31.	2·3	1·2	3·5	1·59	2·35	3·94
32	1·96	1·96	3·92	1·55	2·49	4·04
33	1·7	4·0	5·7	1·75	2·57	4·32
34	2·73	2·39	5·12	1·95	2·46	4·41
35	0·8	1·6	2·4	1·61	2·32	3·93

Midwives' Acts. In accordance with Section 10, Midwives' Acts, 1902, 84 idwives gave notice of their intention to practise in Hull, compared with 77 in 934. Of these, 81 were certificated and 3 were of the *bona-fide* class. 3 midwives moved from the district during 1935, leaving 81 on the list at the end of the year.

Midwives attended 2,709 births during the year 1935. This includes 331 in he practice of the municipal midwives. Excluding the 948 births which occurred n the Municipal Maternity Home, there were 5,225 births (including 179 still irths) in Hull. Accordingly, the 2,709 births attended by midwives represent 1·8 per cent. of the total number of births that occurred in the City; this ompared with 59·9 per cent. in 1934.

By the rules of the Central Midwives' Board, midwives are required to send or medical aid under conditions and for reasons which are definitely specified. Medical aid was summoned in 910 cases, that is, in 33·6 per cent. of their cases, ompared with 27·5 per cent. in 1934. In 610 cases, *i.e.*, in 67·0 per cent., medical elp was required for the mother alone, and in 300 cases, *i.e.*, in 33·0 per cent., for he child alone. For details see Appendix 32 (pages 238 and 239).

The following is a summary of the principal reasons why a doctor was ummoned :

		Percentage of Total cases attended by midwives.
Torn Perineum	135	5·0
Rise of Temperature	41	1·5
Delayed Labour Abnormal Presentation	219	8·1
Retained Placenta	12	0·44
Post-Partum Hæmorrhage	22	0·81
Premature Infant	30	1·1
"Sticky" Eyes	164	5·9

Medical Fees. During the year, 774 claims for payment were received from general medical practitioners, and the total amount paid on these claims was £914 16s. 0d., compared with 724 claims in 1934, when the total cost was £895 8s. 0d.

An analysis of the 1935 claims shows that :—

	£	s	d	£	s	d
774 claims were paid amounting to				914	16	0
49 were Municipal Midwives' cases (payment not recoverable)	46	8	9			
135 were in respect of "eye" cases in respect of which the Authority has decided no claim shall be made	106	12	6			
155 claims for relief from payment allowed—decision "not to press for payment"	214	0	0			
60 cases in which less than the whole fee was claimed—relief granted	44	4	6			
				411	5	0
Amounts recoverable				£503	11	0

Of the amount (£914 16s. 0d.) paid to medical practitioners, it will be seen that only 55 per cent. (£503 11s. 0d.) was recoverable from the patients. In 1934, 46 per cent. and in 1933, 50 per cent. was recoverable.

The amount recoverable this year is made up as follows :—

	£	s	d
60 cases in which less than the whole fee was claimed	44	4	6
103 cases were assessed to pay the whole fee	154	3	6
272 cases in which no claim for relief from payment was received	305	3	0
	£503	11	0

During 1935, the total amount actually recovered from patients, in respect of Medical Fee claims, including those arising in previous years, was £328 8s. 0d. This compares with £344 6s. 3d. collected in 1934.

Supervision of Midwives. 264 visits and re visits were made by the Assistant Inspector of Midwives to the homes of the midwives, in order to inspect their registers and bags. There were also 142 special visits of enquiry to obtain information regarding cases of puerperal fever or pyrexia, pemphigus and ophthalmia neonatorum.

There were 36 suspensions of midwives for the purpose of disinfection for the following reasons :—

Puerperal Pyrexia	14
Pemphigus	16
Ophthalmia Neonatorium	1
Contact with other Infections	5

Suspension was withdrawn as soon as disinfection had been carried out, usually within two or three hours. Owing to concurrent cases of pemphigus, 2 midwives were suspended for 2 days, 1 for 5 days, and another for 7 days. One midwife was suspended for 22 days owing to dermatitis, and another for 6 days owing to contact with infectious disease.

Compensation to Midwives. From the 2 midwives last mentioned in the preceding paragraph claims were received for loss of cases through suspension. Claims were also made by 2 other midwives for compensation for loss of cases owing to patients being sent into the Maternity Home. The sum of 10/- was allowed in respect of the loss of each case through suspension and 5/- in regard to each case sent into the Maternity Home.

Midwives were interviewed by the Senior Assistant Medical Officer of Health on 10 occasions, including 5 instances for failure in their duties either to the mother or the child. It was decided that a warning would meet the circumstances in each case.

Maternal Deaths Notified by Midwives. One maternal death was notified under the regulations of the Central Midwives' Board.

Infant Deaths Notified by Midwives. The number of deaths of infants occurring while a midwife was in attendance, and notified under the Central Midwives' Board's Rules, was 30, compared with 44 in 1934.

With regard to 5 cases, the deaths were reported to the Coroner as having taken place before the patients had been seen by a medical practitioner. A post-mortem examination was made in each case. All the deaths were due to natural causes.

The causes of death of the remainder were as follows :—

Prematurity	14
Atelectasis	5
Birth Injuries	3
Congenital Abnormalities	2
Broncho-Pneumonia	1
	25

Ante-natal examination had been made by the doctor in 1 case, by the midwife in 19 cases, and by the medical practitioner and midwife in 3 cases ; 1 patient attended the Municipal Maternity Centre only ; and 5 the Municipal Maternity Centre and private midwives ; 1 had had no ante-natal care. In 7 cases there was a twin pregnancy. In 14 cases the child was full term ; in 16 cases the birth was premature.

MUNICIPAL MATERNITY HOME AND INFANTS' HOSPITAL.

In addition to the accommodation for maternity cases and cots for infants, there are special wards provided for cases of puerperal fever, puerperal pyrexia, ophthalmia neonatorum and venereal disease in pregnant women.

The accommodation is as follows :—

Maternity Beds	60
Beds for Nursing Mothers	2
Isolation Beds	12
Cots for Infants suffering from Dietetic Diseases	30
	104

The number of patients admitted to the Municipal Maternity Home each year continues to increase. Not only are patients admitted whose home conditions are unfavourable for confinement, but an increasing number of abnormal or complicated cases are sent in by medical practitioners in the City. There were 441 of these emergency admissions during the year.

Applications for admission to the Maternity Home were made at the Central Maternity Clinic, New Cross Street.

All women who apply for admission to the Maternity Home or for the services of the Municipal Midwife, attend a Corporation Clinic for ante-natal supervision.

During 1935, 1,186 cases were admitted compared with 1,177 in 1934. There were 933 actual deliveries in the Home, 843 of these being conducted by midwives and 90 by doctors on the Maternity Home Staff.

The assistance of the resident medical officers was sought in the following cases :—

Ante-Natal	278
During Labour	166
After Labour	317
For the Infant	311
	1072

One hundred and thirty-two patients for whom medical assistance was obtained during the ante-natal period required early induction of labour (surgical or medical) ; in 44 of these cases there was disproportion between the pelvis and fœtal head.

Twelve cases of placenta prævia occurred during the year ; 7 were treated by internal version and 5 were normal deliveries ; 1 proved fatal ; there were also 25 cases of accidental ante-partum hæmorrhage, 1 of which proved fatal.

Two cases of puerperal fever occurred in the Home during the year, 1 was notified as puerperal pyrexia. Both confinements took place at own home.

There were 12 cases of pemphigus neonatorum. 8 of the infants were born in the Municipal Maternity Home.

Fifty-two cases of puerperal pyrexia were notified ; 5 died. 10 cases were delivered in the Municipal Maternity Home.

Eight infants suffering from ophthalmia neonatorum were admitted to the isolation block. A complete recovery was made in 5 cases. 1 infant died from prematurity, 1 from gastro enteritis, and 1 from pemphigus neonatorum. 3 of the infants were born in the Municipal Maternity Home.

The value of breast-feeding is emphasised during the time that the mother and baby are in hospital, but in 48 cases, owing either to illness of the mother or to suppression of the breast milk, the infant had to be fed artificially.

There were 16 maternal deaths in the Maternity Home during the year.

Forceps were applied in 39 cases.

Six cases of venereal disease were treated in the Isolation Block.

There were 67 still-births.

Twenty-nine infants died in the Maternity Home during the first 10 days of life, the cause being :—

Prematurity	20
Hæmorrhage Neonatorum	2
Intra-cranial Hæmorrhage	3
Asphyxia Pallida	2
Spina Bifida	1
Icterus Neonatorum	1
	29

Isolation Wards. These 6 wards, each one of which contains 2 beds and is self-contained, have proved to be of great value.

Cases of abortion, puerperal fever and puerperal pyrexia, are admitted directly to these wards. As miscarriage is so frequently a cause of puerperal infection it is felt that isolation with specialised treatment is the safest course, both for the patient herself and for those she otherwise might infect.

There were 282 admissions to these wards during the year, including 33 transferred from the hospital wards, for the following reasons :—

Threatened Abortion	8
Abortions	173
Puerperal Septicæmia	4
Puerperal Pyrexia	55
Acute Mastitis	6
Mothers with Babies suffering from Ophthalmia Neonatorum	5
Mothers with Babies suffering from Pemphigus Neonatorum	12
Venereal Diseases	6
Pyelitis in Pregnancy or Puerperium	2
Contact with infection before admission	11

One hundred and two operations were performed as follows :—

Exploration of Uterus for retained products of conception	88
Laparotomy	3
Mammary Abscess	6
Posterior Colpotomy	2
Blood Transfusions	2
Incisions in Pyæmia	1

Details of the work done at the Home during the year, set out in the form required by the Ministry of Health, will be found in Appendix 33 (pages 240 to 242).

Assessments of Payments. 1,361 applications for admission to the Maternity Home were received and granted during 1935.

The assessments for maintenance were as under :—

	Assessments taken up.	*Assessments not taken up.*	*Totals* 1935	1934
Free	40	—	40	37
To pay up to and including 19/11 per week	105	1	106	134
,, 20/- and over but less than 39/11 per week	625	70	695	635
,, 40/- and over but less than 59/11 per week	165	27	192	162
,, 60/- and over per week	68	14	82	71
Public Assistance Cases	204	—	204	180
Cases of Venereal Disease	—	—	—	1
Cases from Outside Areas	42	—	42	51
	1249	112	1361	1274

Some of the reasons why the 112 assessments were not accepted were :— irth occurred prematurely at home ; patient changed her mind about going into he Home and made other arrangements ; " had a miscarriage " ; and " fee too igh."

Patients who can pay £3 3s. per week are admitted without enquiry concerning heir financial position. If they cannot pay this, they fill up a form and are assessed n accordance with a scale. The usual charge is from £1 to £2 per week. The patients re brought in by ambulance, and usually remain 14 days.

In cases where maternity benefit is payable, £2 5s. is charged for the 14 days naintenance as a minimum : when two maternity benefits are payable the ninimum payment is 3 guineas.

The amount paid by patients during the year towards the cost of their aintenance at the Maternity Home, including balances from previous years, was 4,117, compared with £3,890 in 1934.

Infants' Hospital. This forms an important unit in our Child Welfare Scheme. Iere dietetic disorders in infants are treated.

Two hundred and twenty-seven applications were received for admission to the Infants' Hospital, all of which were granted. The assessments for maintenance were as under :—

	Assessments taken up.	*Assessments not taken up.*	Total—	
			1935	1934
Free	12	—	12	8
To pay up to 2/6 per week	73	2	75	73
To pay 2/6 and under 5/- per week	14	—	14	8
,, 5/- and under 10/- per week	28	—	28	12
,, 10/- and over per week	25	1	26	13
Public Assistance Cases	69	—	69	48
Cases from Outside Areas	3	—	3	3
	224	3	227	165

Most of the cases are sent in from the Infant Welfare Clinics, but occasionally a child is admitted on the recommendation of a medical practitioner.

Two hundred and twenty-three infants were admitted for the following reasons :—

Marasmus	10
Prematurity	26
Mismanagement	28
Malnutrition	44
Rickets	10
Domestic Reasons	12
Respiratory Diseases	23
Congenital Abnormalities	9
Gastro Enteritis	26
Ophthalmia and Sticky Eyes †	17
Septic Spots†	10
Others	8
	223

† Treated in the Isolation Block.

Of these, 93 were discharged in a satisfactory condition ; 5 were transferred to other hospitals ; 22 were taken home against advice ; 42 died from the following causes :—

Gastro Enteritis	12
Respiratory Diseases	10
Prematurity	5
Marasmus	9
Congenital Abnormalities	2
Pemphigus Neonatorum	3
Tubercular Meningitis	1

And 20 were still in hospital at the end of the year.

The amount paid during the year in respect of infants, towards the cost of their maintenance, including balances from previous years, was £366, compared with £354 during 1934.

Training School, Municipal Maternity Home. During the year 28 pupils commenced their training; 28 pupils who had completed their course entered for the Central Midwives' Board examination. 18 were successful, including 3 who failed at the first sitting. The training of 5 pupils was cancelled.

The Ministry of Health's grant was claimed in respect of 20 pupils who propose to practice midwifery or to become Health Visitors.

The amount of fees for training receivable in respect of each of the last 3 years is as under:—

Financial Year	*Paid by or on behalf of Pupils.*			*Government Grant.*			*Total.*		
	£	s	d	£	s	d	£	s	d
1935–36	432	10	0	695	0	0	1127	10	0
1934–35	671	0	0	590	0	0	1261	0	0
1933–34	549	0	0	465	0	0	1014	0	0
1932–33	647	10	0	470	0	0	1117	10	0

Grants to Local Voluntary Associations. Financial assistance was given by the Corporation to the following local voluntary associations engaged in maternity and child welfare work:—

Hospital Provision	York Diocesan Home	£635
Day Nurseries	East Hull Nursery West Hull Nursery	.... £560*

*Including £200 previously paid by the Corporation direct to these Associations.

Subscriptions are also paid to the following:—

Victoria Hospital for Sick Children	£150
Hull Jubilee District Nursing Association	£100
Sutton Nursing Association ..	£50

Municipal Midwives. The staff consists of 4 certificated midwives and 3 pupil midwives. During 1935, all the free midwifery cases were attended by the Municipal Midwives.

Applications received for the services of a free midwife numbered 408, of which 335 were granted; the remaining 73 being outside the income scale, were not granted.

The Municipal Midwives attended 331 cases and conducted 265 deliveries. 62 births occurred before the midwife arrived, and 4 patients were delivered by a doctor who was called in because of complications. 4 cases developed puerperal pyrexia ; a complete recovery was made in each case. 1 mild case of pemphigus occurred. Medical aid was obtained for 10 cases of discharging eyes ; in each case the patient recovered without any impairment of vision.

No maternal death occurred in the practice of the Municipal Midwives.

There were 8 still-births, for 6 of which there was no apparent cause. Of the remainder, 1 was due to prematurity and 1 to twin pregnancy.

Medical aid was summoned for the following reasons :—

Ante-Natal—	Albuminuria	2	
			—2
During Labour—	Ante-Partum Hæmorrhage	1	
	Forceps : Delayed 2nd stage	2	
	Prolapsed Cord	1	
	Uterine inertia	1	
	Others	5	
			—10
Post-Partum—	Ruptured Perineum	11	
	Puerperal Pyrexia	5	
	Post Partum Hæmorrhage	4	
	Phlebitis	2	
	Collapse after Labour	3	
			—25
Infant—	Congenital Deformities	1	
	Skin conditions	12	
	Discharging Eyes	10	
	Dangerous Feebleness	7	
			—30
			67

Ante-Natal Care. Every effort is made to assist midwives to keep the ante-natal records prescribed by the Central Midwives' Board. Midwives are encouraged to bring or send their cases to an Ante-Natal Clinic, and 319 patients referred by midwives were sent during 1935. Of these, 300 attended the Central Maternity Clinic, and 19 the East Hull Clinic.

Central Maternity Clinic. Ante-Natal Clinics were conducted on Tuesday and Thursday mornings at New Cross Street by Dr. Findlay, and by Dr. Griffith until the end of March, when Dr. Sharvelle took over the duties.

Wednesday : 53 sessions were held during the year, with 799 attendances ; the first attendances numbered 343 and the re-attendances 456.

Thursday : 51 sessions were held, with a total of 996 attendances, of which 478 were first attendances and 518 re-attendances.

The following figures show the work of the clinic :—

Total No. of Attendances	1795
First Attendances	821
Re-attendances	974
Primiparæ	470
Multiparæ	1316
Not Pregnant	3
Post-Natal Attendances	6
No. referred to—	
Mill Street Clinic	8
Maternity Home Clinic	188
Dental Clinic	154
Private Doctor	17
Dispensaries	3
Hull Hospital for Women	4
Hull Royal Infirmary	7
X-Ray Clinic	7
Public Assistance Institution Hospitals	3

Ante-Natal Clinic for Maternity Home and Municipal Midwives' Cases. Sessions are held on 3 afternoons a week for the examination of patients who are to be admitted to the Maternity Home, or who are to be attended by the Municipal Midwives. The total attendances numbered 7,667, with 1,377 first visits, compared with 7,625 total attendances and 1,295 first visits in 1934.

The Municipal Midwives visit the homes of all these cases, and a total of 2,281 visits were paid to patients before confinement. These included 432 visits o investigate applications for the services of a Municipal Midwife, and 1,849 other ante-natal visits.

Ante-Natal Clinic, East Hull. Dr. Alice Steven conducted an Ante-Natal Clinic each week at the East Hull Centre.

In all, 51 sessions were held, and there were 623 attendances, an average of 12·2 per session. Of these, 282 were first attendances, 19 being referred for examination and advice by midwives ; the remaining 341 were re-attendances. 27 patients attended for post-natal examination. It was found necessary to refer 19 patients to their private practitioners, 11 to the Hull Royal Infirmary, 4 to the Corporation Clinic, Mill Street, and 80 for dental treatment.

Summary of Ante-Natal Work. The number of patients seen at all the Ante-Natal Clinics was 2,480. The number of births, including 246 still-births, in the City was 6,173. The number of women seen at a Municipal Ante-Natal Clinic was therefore about 40 per cent., compared with 38 per cent. in 1934.

Among 2,480 women who attended the Ante-Natal Clinic there were 5 maternal deaths.

Treatment Clinic. Maternity Centre, New Cross Street. 1,811 douches were given. 771 patients received treatment by the doctor. 299 were first visits and 472 re-visits.

Post Natal Clinic. All mothers treated in the Maternity Home, or by the Municipal Midwives, were advised to attend the Post-Natal Clinic held twice monthly at the Central Maternity Clinic. The doctors from the Maternity Home attended each session. The following table shows the attendances :—

	1st Attendances.	*Re-attendances.*	*Total.*
From the Maternity Home	329	136	465
,, Practice of the Municipal Midwives	85	43	128
,, Others	48	—	48
	462	179	641

The following defects were noted :—

Retroversion	23
Prolapse	10
Subinvolution of Uterus	8
Constipation	26
Anæmia and Debility	59
Vaginal discharge	12
Laceration of Cervix	20
Varicose Veins	4
Others	212
Total	374

Twenty-three were referred to the Gynaecological Clinic. In each case advice was given and the patient referred, if necessary, to her own doctor, or to hospital, for treatment.

Gynaecological Clinic. This Clinic was commenced on the 3rd February, 1932. It is held at New Cross Street Maternity Centre on the first and third Wednesday mornings in the month' Dr. Standring has charge of this Clinic.

The following patients attended for advice :—

Gynaecological	First visits	17
	Re-visits	23
Birth Control	First visits	121
	Re-visits	264
	Unsuitable cases	—

One hundred new applications and 27 renewals for the supply of accessories were received : all were granted.

Maternity Bags. 20 maternity bags containing the bed-linen and clothing necessary for use during confinement, are stored at the Maternity Centre and lent to necessitous mothers. During the year the bags were lent to 36 mothers for periods of 2 to 3 weeks.

Sterilised Maternity Outfits. The Maternity and Children Sub-Committee, vith the approval of the Ministry of Health, have obtained a number of sterilised utfits. Practising midwives may obtain them on application to the Maternity nd Child Welfare Department, at the Guildhall, at the cost price, 5/9 each, and hey are asked to recommend them for the use of those patients who have lifficulty in obtaining a proper supply of sterilised material. The Municipal Midwives who attend cases in the poorest homes in the City may use a sterilised utfit whenever it is considered necessary for the safety of the patient ; 4 sterilised utfits were so used during the year by Municipal Midwives, and 34 were purchased y private patients.

Provision of Dentures. The scheme for the provision of dentures for expectant nd nursing mothers has been continued. A few of the mothers do not appreciate he importance of skilled attention to the teeth during pregnancy, with the result hat they fail to keep appointments made for them with the dental officer. ortunately, a large number of mothers do realise the importance of dental care, not only for themselves, but also for their babies, and the department is encouraged o maintain the facilities provided.

Extractions are done by one of the Dental Officers attached to the School ledical Department, and dentures are fitted and provided by members of the anel of practising dentists in the City who have agreed to co-operate in the scheme.

Up to the end of the year, there were 212 applications for dentures, compared vith 247 during 1934, and 252 during 1933.

Twenty-six were refused because of failure to attend for dental treatment ; applicant was found to be entitled to Dental Benefit through Approved Societies ; did not proceed with their applications, and 1 left the City.

In 1935, the number of dentures supplied was 133, at an average cost of £5 0s. 7d., compared with 167 supplied in 1934, at an average cost of £5 0s. 6d., and 154 in 1933, at an average cost of £4 19s. 1d.

The average assessment was £1 17s. 7d., compared with £1 12s. 9d. in 1934, and £1 7s. 9d. in 1933.

During the year under review, the total amount recovered from applicants in respect of dentures, including those arising in previous years, was £250 3s. 0d., as against £260 8s. 6d. in 1934, and £297 9s. 9d. in 1933.

Home Helps. For the ninth year the scheme for the provision of home helps has worked very satisfactorily.

Four hundred and ninety-seven applications were received during the year, compared with 497 in 1934, and 465 in 1933.

The following table gives an analysis of the applications for 1934, and shows the assessments made, the applications cancelled, and those proceeded with :—

Applications.			Stated could not afford to pay the assessment.	Made other arrangements.	Proceeded with.	
Not granted.	Granted. Assessed to pay.	No.			No.	Per cent. of Total applications.
	Free.	4	—	3	1	·20
	6d. a day	5	—	—	5	1·00
	1/- a day	301	4	43	254	51·11
	2/- a day	89	5	33	51	10·27
	3/- a day	36	8	21	7	1·41
	5/- a day	16	7	7	2	·40
	5/6 a day	19	6	13	—	—
27		470	30	120	320	64·39

The above figures include 5 instances where a home help was applied for in cases other than maternity : 4 applicants proceeded with the arrangements.

During the year, 320 cases were attended by 42 home helps.

The home helps, under the supervision of the Health Visitors, have carried out their work in a highly satisfactory manner. Doctors and midwives have drawn the attention of their patients to the facilities provided.

The usual period for which a home help's services are granted is 14 days, and it is only where there is an urgent medical reason that the time is extended beyond that period. In the 30 instances where extensions were allowed, medical certificates were furnished.

In the 44 cases with periods varying from 7 to 13 days, the mothers were able to manage without further assistance, and the home help's services were terminated.

The majority were cases of normal confinement where the mother had no friend or relative to assist her, or could not go into the Maternity Home because of the number of children to be looked after at home.

The gross cost to the Corporation of the 320 cases was £1,288 10s. 3d., compared with 345 cases during 1934 at a cost of £1,377 9s. 6d.

During 1935, the total amounts recovered in respect of home helps, including those outstanding from previous years, was £253 12s. 3d., compared with £287 9s. 9d. during 1934.

Registration of Nursing-Homes. The Nursing Homes Registration Act, 1927, came into force on July 1st, 1928. The model Bye-laws issued by the Ministry of Health were adopted from that date.

There are 21 Homes on the register. One has been unoccupied throughout the year.

Every Nursing Home was inspected by a Sanitary Inspector during the year, and also by the Senior Assistant Medical Officer of Health (Maternity and Child Welfare) or the Superintendent Health Visitor.

During the year, 442 births occurred in registered private Maternity Homes; 426 of these were live births, and the remaining 16 were still-births. No maternal deaths occurred.

Puerperal Fever. 3 cases of puerperal fever were notified in 1935, 13 in 1934, and 8 in 1933.

Of these 3 notified cases, 2 were treated in the Municipal Maternity Home, and 1 in the Hull Hospital for Women. One case was normal, and in the other two forceps had to be used. All recovered.

Supplies of anti-streptococcal serum are available at the Municipal Maternity Home for issue to general medical practitioners for emergency cases of puerperal sepsis.

Puerperal Pyrexia. 51 cases of puerperal pyrexia were notified during 1935. Of these, 6 proved fatal, the cause of death being due to septicæmia in 5 cases, and to lobar pneumonia in 1 case.

The causes of the rise in temperature in the remaining 45 cases were :—

Infection of the Genital Organs	34
Respiratory Diseases	4
Mastitis	3
Pyelitis	1
Other Causes	3
	45

Ophthalmia Neonatorum. During 1935, 189 cases of discharging eyes were reported by midwives and 9 by the Health Visitors. Of these, only 31 were notified as ophthalmia by the medical practitioners called to attend them. Of the 198 cases, 55 occurred in primiparæ and 143 in multiparæ. A history of vaginal discharge was given in 19 cases ; 11 of these were multiparæ and 8 primiparæ. Collosol Argentum is supplied free of charge to midwives for prophylactic use.

The following summary shows the agency through which treatment was given in connection with the 31 notified cases :—

Treated at home	22
,, Public Assistance Hospital	1
,, York Diocesan Maternity Home	2
,, Isolation Block, Maternity Hospital	5
,, Hull Royal Infirmary (Out-patient)....	1

Of the 31 notified cases, there was a history of maternal discharge in 8 ; previous children had been affected in 2 other cases.

The dates of onset in the 198 cases of the disease were :—

Day	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	Later
No.	12	16	14	18	20	15	12	28	19	21	23

NOTIFICATIONS.

Year.		*Number.*		*Per* 1,000 *births.*
1930	....	37	....	5·9
1931	....	26	....	4·3
1932	....	31	....	5·1
1933	....	40	....	7.0
1934	....	31	....	5·3
1935		31	. ..	5·2

Close co-operation has been maintained between the Ante-Natal Clinics and the Venereal Diseases Treatment Centre. Early treatment for cases of gonorrhœa in expectant mothers is thus secured, and the incidence and severity of ophthalmia neonatorum are reduced. It is now a rare occurrence to see a child blinded by ophthalmia neonatorum.

Pemphigus Neonatorum. This disease is compulsorily notifiable in the City. During 1935, 30 cases were reported to the Medical Officer of Health. The disease was of the mild type in all but 3 cases, where the infants died. 5 cases occurred before the 7th day, 9 between the 7th and 10th days, and 16 after the 10th day.

The maternal health was good in 23 cases, fair in 2 and poor in 5 cases. The Jubilee District Nurses attended mother and child in 8 cases. The midwife in attendance upon each case of pemphigus neonatorum was sent to the Municipal Disinfecting Station for a disinfectant bath, and for the disinfection of her maternity bag and appliances. 1 case occurred in the practice of the Municipal Midwives, and 2 cases born at home, were removed to the Public Assistance Hospitals, and 4 to the Isolation Block of the Municipal Maternity Home.

Infantile Diarrhœa. There were 80 deaths among children under the age of 5 years in 1935, compared with 48 in 1934. Of the deaths in 1935, 68 occurred in children under 12 months, 8 between 1 and 2 years of age, and 4 between the ages of 2 and 5 years. All the cases were investigated by Health Visitors.

It was found that the diets were :—

Breast feeding entirely	13
Partially Breast fed	8
Dried milk	32
Tinned milk	4
Cows' milk	7
Mixed	16
	80

In 28 cases the child had never attended a clinic ; in 25 cases, irregular attendances had been made, and in 27 cases the child had attended regularly.

Still-Births. The number of still-births registered during the year was 246, including 67 at the Municipal Maternity Home. The 246 still-births represent a rate of 41·5 per 1,000 registered live births. 21 of the still-births were notified by doctors, 114 by midwives, 67 from the Municipal Maternity Home, and 44 by the Registrars of Births and Deaths. In 56 cases a doctor only attended the confinement, in 52 a doctor and a midwife, and in 137 a midwife only. The circumstances relating to the finding of 1 body in the street were reported to H.M. Coroner who ordered a post-mortem examination to be made. In 129 cases, the fœtus had arrived at full-term ; in 65 the birth was premature, and in 52 cases, no particulars could be obtained.

Infantile Mortality. 428 deaths of infants occurred under 1 year of age. This gives an infantile mortality rate of 72·2 per 1,000 births, compared with 64·0 in 1934, and 76·6 in 1933.

The chief causes of infantile mortality during the year were: Prematurity, 87; pneumonia, 86; and diarrhœa and enteritis, 69.

Fifty-two infants died on the day they were born; 111 (26 per cent. of the total mortality under 1 year) died before they were a week old; and 173 (40 per cent. of all the deaths under 1 year) occurred in infants under the age of 1 month.

The 173 neo-natal deaths are an indication of unfavourable ante-natal conditions.

The neo-natal mortality—that is, the death-rate under 1 month of age per 1,000 births—was 29·1, compared with 29·5 in 1934, and 30·8 in 1933.

The following table shows the number of deaths of infants under 1 year of age, and the rate per 1,000 births for the last 10 years, and for 10, 20, 30, 40 and 50 years ago:—

Year	*No. of deaths. under one year of age.*	*Rate per 1,000 births.*
1885	799	127
1895	1516	206
1905	1184	153
1915	867	120
1925	603	93
1926	522	82
1927	509	82
1928	481	79
1929	634	104
1930	434	69
1931	489	81
1932	414	68
1933	440	77
1934	375	64
1935	428	72

For full particulars of the deaths of infants, *see* Appendix 36, page 246.

Child Mortality. During 1935, there were 157 deaths of children between the ages of 1 and 5 years, compared with 126 in 1934, and 228 in 1933.

The principal causes of child mortality for each of the past 5 years are as under:—

	1935	1934	1933	1932	1931
Pneumonia	40	43	79	12	17
Whooping Cough	13	5	4	24	14
Diphtheria	21	24	41	52	36
Measles	15	3	25	3	51
Tuberculosis (all forms)	19	12	19	17	26

Notification of Births Acts. The live births notified by midwives numbered 3,257, and by doctors, parents and others, 843. These figures do not include the 881 live births which occurred in the Municipal Maternity Home. The number of births not notified was 946.

Health Visitors. During the year, the Health Visitors continued to carry out their many and varied duties in an efficient manner and the scope of their work is reflected in the attendance of children at the Child Welfare Centres. The percentage of children up to 5 years of age who have attended a clinic at least once in each Health Visitor's district is:

	1935	1934
District No. 1	23·0	36·0
2	34·3	33.3
3	44·0	39·0
4	37·5	36·4
5	36·0	36·6
6	39·0	37·2
7	33·7	35·0
8	31·5	34·5
9	44·6	42·2
10	31·0	30·0
11	59·0	48·2
12	32·0	32·0
13	35·0	32·3
14	49·0	48·0
15	40·5	52·5
16	43·8	44·0
17	37·0	38·0
18	56·1	58·4
19	38·0	53·0
20	41·0	42·0
21	37·8	44·0
22	58·8	51·7
23	40·7	44·0
24	38·4	40·5
25	24·0	24·5
26	38·0	—
Average	39·0	40·5

The number of children removed from Hull and notified to other authorities was 256.

The total number of visits paid by Health Visitors during the year was 100,052: the number of clinic sessions attended by them was 4,771. For details of the visits, *see* Appendix 37 (pages 247 to 249).

Training of Health Visitors. The scheme for the training of Health Visitors was continued, 8 Probationer Health Visitors taking up their duties in the Health

Department in April, 1935. The Course of Instruction for the Health Visitors' Certificate arranged by the Council of the University College of Hull, commenced on April 1st. Students attended the University College for 80 lectures during 3 academic terms; they received in addition, special lectures and demonstrations by members of the Public Health Department staff each week, and were given a wide practical experience of all branches of Public Health work in the School Medical, Tuberculosis and Maternity and Child Welfare Departments. 6 were successful in obtaining the Health Visitor's Certificate, a special examination being held in the Technical College, Hull, in March, 1936. The other 2 were successful at the next examination held in Birmingham.

Infant Life Protection Visitors. Miss Harrison continued to act as Infant Life Protection Visitor for the area formerly administered by the Hull Board of Guardians, and Miss Shrewsbury, Health Visitor, for that part of Hull previously within the area of the Sculcoates Board of Guardians.

During the year, 664 visits were paid to foster children, 53 being first visits, and 611 re-visits.

The following notices were dealt with :—

Reception of nurse-child	39
Change of address	18
Returned to relatives	23
Removal to another area	16
Death	1

Three children were adopted under the Adoption of Children Act, 1926. At the end of the year there were 67 children on the Register.

Child Welfare Clinics. As in previous years, the full-time medical officers in the service of the Corporation have been assisted in the conduct of Child Welfare Clinics by Drs. Jackson, Collishaw, Gibson and Redfern.

Lists of Infant Welfare Centres and Ante-Natal Clinics were, by the kind permission of the Postmaster, exhibited in the Post Offices during the year.

During the year building operations were commenced on the new clinic in Ellerburn Avenue, and it is hoped that it will be brought into use in 1936.

This clinic has been constructed to serve the needs of those residing in the largest of the Corporation's Housing Estates, and in the adjoining district in the Northern part of the City.

The premises will be used by the Maternity and Child Welfare and School Medical Departments for clinic purposes, and provision has also been made for a Dining Centre for mothers and toddlers. This clinic will meet a long-felt want, and the services thus provided will be much appreciated by the residents in North Hull.

CHILD WELFARE CLINICS.

The following table summarises the work done at the Child Welfare Clinics during the year:—

	East Hull Clinic.	West Hull Clinic.	Queen's Hall Clinic.	King's Hall Clinic.	Dairycoates Clinic.	Marfleet Clinic.	Newland Clinic.	Sutton Clinic.	Albert Avenue Clinic.	North Hull Clinic.	Total 1935.	Total 1934.	Total 1933.
No. of Sessions	201	252	152	189	103	51	51	43	101	51	1194	1142	1181
Children under 1 year—New Cases	663	603	343	511	360	131	210	84	454	196	3555	3410	3289
Re-attendances	8532	8009	4340	7839	4394	2514	3138	996	6179	2782	48723	43337	40565
Children over 1 year—New Cases	120	139	51	50	93	24	54	5	83	78	697	697	878
Re-attendances	4871	5310	4205	3816	2476	1999	1669	1047	3151	2172	30716	27240	22855
Children between 2 and 5 years—													
New Cases	97	62	—	43	—	—	—	—	—	—	202	259	322
Re-attendances	1591	1654	—	1612	—	—	—	—	—	—	4857	4635	4628
Total attendances	15874	15777	8939	13871	7323	4668	5071	2132	9867	5228	88750	79578	72537
Mothers who received advice—													
(*a*) about themselves	—	7	—	—	—	—	—	—	—		7	8	2
(*b*) about their children	2668	3349	2394	2872	919	173	324	3	313	1354	14279	11849	9345
Cases referred for Private or Hospital Treatment	78	105	138	101	45	17	31	3	69	25	612	560	577
Doctor's Sessions	201	201	104	189	103	51	51	43	87	51	1081	992	995
Weighing Sessions	—	51	48	—	—	—	—	—	14	—	113	150	186
Average attendance, Doctor's Session	93·3*	70·6*	58·8	89·8*	71·1	91·5	99·4	49·6	97·7	102·5	—	—	—
,, ,, Weighing Session	—	50·6	50·4	—	—	—	—	—	72·7†		—	—	—
Cases seen by the Doctor	7086	6003	3061	4760	3248	1488	1808	1029	3574	1995	34052	33343	31949

* Excluding Toddlers' Sessions.

† Weighing sessions held only for first 3 months of the year

The total attendances at the clinics increased from 79,578 in 1934, to 88,750 in 1935.

There were 34,052 medical consultations in 1935, compared with 33,343 in 1934 ; the number of doctors' sessions was 1,081 in 1935, and 992 in 1934.

During 1935, 612 children were referred from the clinics for private or hospital treatment.

Talks to Mothers. Short talks were given by the Health Visitors at the following Infant Welfare Clinics :—

West Hull, 216 ; East Hull, 189 ; King's Hall, 125 ; Queen's Hall, 99 ; Dairycoates, 87 ; Marfleet, 33 ; Newland, 50 ; Sutton, 41 ; Albert Avenue, 64 ; North Hull, 49 ; and West Hull Light Clinic, 181, making a total of 1,134.

Amongst the subjects discussed were :—

" Infectious Diseases."
" Constipation."
" General Hygiene."
" Diets."
" Habit Forming."
" Breast Feeding."
" Fireguards."
" Schick Testing."
" Dummies."
" First Aid in the Home."

Voluntary Workers at Clinics. Voluntary workers continue to do valuable work at the Child Welfare Clinics, attending both morning and afternoon sessions, in order to help in the general work of the clinics.

The Chairman of the Committee of the Voluntary workers is Mrs. Lawton. Meetings are held half-yearly. Our thanks are due to the ladies who give so much of their time, and it is hoped that further volunteers will be forthcoming to assist in the increasing work of the clinics.

Welfare of Toddlers. Measures for the improvement of the health of the pre-school child in Hull were continued. The 3 Clinics for Toddlers held at King's Hall, the West Hull Clinic, Coltman Street, and the East Hull Clinic, Morrill Street, were well attended. The number of children between the ages of 2 and 5 years seen at these clinics was 3,010, and the attendances numbered 5,059. If any hysical defect was found at the medical examination, advice was given as to the est method of obtaining the necessary treatment, and many cases were referred o the School Clinic for dental treatment, and for the treatment of minor ailments. Routine visits were paid to the homes of these children by Health Visitors, and free nilk and nutritives were granted to necessitous children certified by the Clinic Medical Officer as requiring them.

Interavailability of Clinics. Children under 5 years of age who are suffering rom squint, dental caries, minor ailments, aural or cardiac defects, are referred o the School Medical Department for treatment.

The following figures supplied by the School Medical Officer show the numbers f cases so referred :—

	Cases.	Attendances.
Minor ailments	941	3,049
X-Ray Examinations	9	9
Aural Affections	71	154
Rheumatism and Heart Affections	15	29

East Hull Clinic—Ophthalmic Clinic. During the year, 161 children under 5 years of age suffering from squint made 287 attendances at the clinic. Glasses vere prescribed in 117 cases, and in 93 of these the financial circumstances were uch that the spectacles were supplied free, at a total cost to the Corporation of £11 4s. 2d.

Dental Clinic. The following table summarises the dental treatment given to hildren under 5 years of age, and to expectant and nursing mothers :—

	Children under 5 years.	*Expectant and Nursing Mothers.*
Number dealt with	484	619
Attendances	642	2923
Extractions—(1) Temporary Teeth	1037	—
(2) Permanent Teeth	—	5025
Fillings—(1) Temporary Teeth	14	—
(2) Permanent Teeth	—	102
Other operations	284	355
Administration of General Anaesthetics	200	803

Orthopaedic Clinics. All orthopaedic cases referred by the Department were examined by the Orthopaedic Surgeons appointed by the School Medical Department, or by the Orthopaedic Surgeon appointed by the Maternity and Child Welfare Department.

Central School Orthopaedic Centre. During the year, 64 new cases were seen, and the following table summarises the work done by the Orthopaedic Surgeons at this clinic.

	CASES SENT BY		
	M. & C.W. Dept.	Tuberculosis Dept.	Other Branches of Health Dept.
Deformities—			
Rickets	8	—	1
Spinal Curvature	—	1	1
Infantile Paralysis	4	—	2
Other Forms	34	2	5
Tuberculosis—			
Spine	—	2	—
Hip	—	1	—
Other Bones and Joints	—	—	—
Totals	46	6	9
Treatments Given—			
Massage	334	11	87
Electrical	2	1	15
Remedial Exercises	334	7	94
Other	48	2	88
Totals	718	21	284

The number of inspections of all cases was 311, and the total number of treatments given was 1043.

East Hull Orthopædic Clinic. Inspection Clinics held by the Orthopædic Surgeons were attended by 386 cases, as shown in the following table :

	GENERAL HEALTH.		EDUCATION SECONDARY.		EDUCATION ELEMENTARY.		TUBERCULOSIS.		PUBLIC ASSISTANCE.		MATERNITY & CHILD WELFARE		TOTAL ATTENDANCES.		
	First	Other	First	Other	First	Other	First	Other	First	Other	First	Other	1935	1934	1933
Deformities															
Rickets		—					—		—	—	—	—			9
Spinal Curvature		—	—	—			—		—	—	—	—		1	2
Infantile Paralysis		2		1	2	58				1	—	7	71	69	81
Other Forms		1	1	6	28	130			9	18	35	61	289	275	275
Tuberculosis															
Spine	—	—	—	—	—	—	2	3	—	—	—	—	5	6	3
Hip	—	—	—	—		1	1	3	—	—	—	—	5	6	9
Other Bones and Joints	—				2	2	3	9	—			—	16	10	15
TOTAL		3	1	7	32	191	6	15	9	19	35	68	386	367	394

The following table shows the attendances for treatment made by children during the year :—

MASSAGE.										ELECTRICAL.									
FIRST.					OTHER.					FIRST.					OTHER.				
* E.	* E.S.	* T.B.	*M.& CW	*G. H.	E.	E.S.	T.B.	M. & CW	G. H.	E.	E.S.	T.B.	M. & CW	G. H.	E.	E.S.	T.B.	M. & CW	G. H.
7	2	–	1	–	2007	44	–	828	72	2	2	–	1	–	1260	28	–	475	46

REMEDIAL EXERCISES.										OTHER.									
FIRST.					OTHER.					FIRST.					OTHER.				
E.	E.S.	T.B.	M. & CW	G. H.	E.	E.S.	T.B.	M. & CW	G. H.	E.	E.S.	T.B.	M. & CW	G. H.	E.	E.S.	T.B.	M. & CW	G. H.
30	2	–	1	–	2844	52	–	828	72	2	–	–	1	–	163	–	–	147	1

TOTAL ATTENDANCES.

FIRST.					OTHER.				
E.	E.S.	T.B.	M. & C.W.	G.H.	E.	E.S.	T.B.	M.& C.W.	G.H.
41	6	–	4	–	6214	124	–	2278	191

Grand Total, 8,858.

*E signifies cases from Elementary Education Department.
*E.S. ,, ,, Education Secondary Department.
*T.B. ,, ,, Tuberculosis Department.
*M. & C.W. signifies cases from Maternity and Child Welfare Department.
*G.H. ,, ,, ,, Other Branches of the Health Department.

In-Patient Treatment for Orthopædic Cases. One case was sent for treatment to the Yorkshire Children's Orthopaedic Hospital, Kirbymoorside, during 1935.

Supply of Splints. Children are provided with splints when ordered by the Orthopaedic Surgeon. Plaster splints were made at the Park Avenue Special School, and others were ordered from manufacturers of surgical apparatus. The necessity for the payments for splints, other than plaster splints, did not arise luring 1935, as the local organiser of the Hull Guild of Brave Poor Things made rrangements for those appliances ordered by the Orthopaedic Surgeon to be upplied from the Guild and paid for by weekly payments. In some cases splints vere provided by voluntary organisations, such as the Poor Bairns' Fund, and, in thers, part of the cost of the appliances was paid by the Guild of Brave Poor 'hings.

Subsidiary Massage Clinic, 69 Coltman Street. The work of this centre is r the treatment of children under 5 years of age living too far from the main rthopaedic centres. Four sessions are held each week.

The total number of attendances during the year was 799. The treatments iven were :—

Massage	799
Muscle Re-education	792
Electrical	211
Other	74
Total	1876

X-Ray Department—East Hull Clinic. There were 156 cases referred by the chool Medical Department, 1,031 by the Tuberculosis Department, 1 by the 'ublic Assistance Department, and 185 by the Maternity and Child Welfare)epartment, making a total of 1,373 cases in all. The radiologists were Dr. Bannen nd Dr. Hermon, who attended for 46 sessions.

Convalescent Home Treatment. Provision has been made by the Corporation r mothers, in certain cases, to have convalescent home treatment after difficult onfinements or prolonged nursing. In the year under review, 26 mothers and 6 babies were sent to the Yorkshire Convalescent Home for Mothers and Babies, Vithernsea. On the recommendation of the medical officers at the Maternity nd Child Welfare Clinics, 26 mothers and their 24 babies were sent to this home for wo weeks by the Local Committee of the Institution.

Christmas Entertainments for Clinic Mothers. In January, under arrangements nade by the Voluntary Workers, the "Tec's Concert Party" gave five excellent ntertainments at the principal centres. Each concert was attended by over 200 nothers, who thoroughly enjoyed the entertainment and the refreshments provided. 'he attendance of Members of the Committee at these entertainments was much ppreciated.

The Municipal Light Clinics—Lamps. The 3 types of lamp in use are the 'ungsten Arc, Mercury Vapour and Carbon Arc. An infra-red ray lamp is used at ast Hull Clinic, in conjunction with the Mercury Vapour Lamp. At the West

Hull Clinic a Kromayer Lamp is also available for the treatment of special types of cases. Treatment by all lamps remains as described in previous reports.

The following table shows the work of the clinics :—

	Lamps.	*Sessions.*	*New Cases.*	*Attendances.*
1935	3 West Hull 3 East Hull	307	669	11188
1934	3 West Hull 3 East Hull	305	786	11990
1933	3 West Hull 3 East Hull	304	876	12779

The majority of the cases treated were children under school age suffering from Rickets or Malnutrition : 29 school children, the majority of whom were suffering from debility following operations or illnesses, completed treatment during the year, making a total of 705 attendances. Cases of lupus continued to improve slowly : general treatment is given by the Mercury Vapour Lamp, and local treatment by the Kromayer Lamp.

LIGHT CLINIC STATISTICS.

	WEST HULL.		EAST HULL.		
	Tungsten Arc.	Mercury Vapour.	Mercury Vapour.†	Carbon Arc.	TOTAL.
No. of Patients receiving treatment on Jan. 1, 1935	24	70	13	31	138
,, ,, beginning during year	99	369	50	151	669
,, Repeat courses ,, ,,	31	87	10	28	156
,, courses of treatment ,, ,,	154	546	83	210	993
,, Patients transferred to other lamps	17	1	2	2	22
,, ,, transferred from other lamps	—	20	10	—	30
,, ,, discharged	77	369	36	154	636
,, ,, treatments cancelled	29	92	28	41	190
,, ,, receiving treatment on Dec. 31, 1935	—	82	18	33	133
Total attendances for 1935	1024	6728	1270	2166	11188
Attendances—Maternity and Child Welfare	1024	4903	448	2149	8524
School Clinic	—	447	182	17	646
Tuberculosis Clinic	—	1319	640	—	1959
Others	—	59	—	—	59
Others— Adults	—	—	—	—	—
School Age	—	1	—	—	1
Infants	—	—	—	—	—
No. of Sessions	57	303	104	97	561

†The Infra red Ray Lamp was used with the Mercury Vapour Lamp in suitable cases.

TUNGSTEN ARC. WEST HULL.

No. of cases treated, with results.

	Cured.	Much Im-proved.	Im-proved.	Un-changed.	Worse.	Can-celled.	Total.
ickets	—	3	42	2	—	14	61
alnutrition and Marasmus	-	1	8	2	-	9	20
ebility	–	—	14	1	—	4	19
næmia	·		1	—	—	—	1
iseases of Respiratory System	—		3	—	– –	2	5
Total		4	68	5	– –	29	106

Patients still under treatment not included.

MERCURY VAPOUR. WEST HULL.

	Cured.	Much Im-proved.	Im-proved.	Un-changed.	Worse.	Can-celled.	Total.
ickets	—	20	126	8	—	33	187
alnutrition and Marasmus	—	16	40	4	—	11	71
ebility	1	14	62	13	—	23	113
næmia	–	6	10	1	—	5	22
ervical Adenitis	3	7	7	4	—	5	26
urgical Tuberculosis	1	2	2	—	—	2	7
iseases of Respiratory System	—	16	7	1	—	10	34
iseases of Skin and Hair	2	2	3	—	—	3	10
Total	7	83	257	31	—	92	470

Patients still under treatment not included.

he use of the Tungsten Arc Lamp has been discontinued since August 31st, and the Carbon Arc has worn out. A new Mercury Vapour Lamp has been used in their place.

MERCURY VAPOUR. EAST HULL.

	Cured.	Much Im-proved.	Im-proved.	Un-changed.	Worse.	Can-celled.	Total.
ickets	-	—	12	1	– –	2	15
alnutrition and Marasmus	—	1	5	– –	—	1	7
ebility	—	1	7	–	—	8	16
næmia	—	—	1	–	—	1	2
ervical Adenitis	-	—	1	-	—	9	10
urgical Tuberculosis	—	—	—	-	– –	4	4
iseases of Respiratory System	—	–	2	2		1	5
iseases of Skin		2	1	-	– –	2	5
Total	–	4	29	3		28	64

Patients still under treatment not included.

CARBON ARC. EAST HULL.

	Cured.	Much Im-proved.	Im-proved.	Un-changed.	Worse.	Can-celled.	Total.
Rickets	—	8	83	—	—	21	112
Malnutrition and Marasmus	—	2	5	—	—	4	11
Debility	—	2	23	—	—	8	33
Anæmia	—	1	4	—	—	2	7
Cervical Adenitis	—	3	1	—	—	1	5
Diseases of Respiratory System	—	1	12	—	—	1	14
Total	—	17	128	—	—	37	182

Patients still under treatment not included.

Corporation Clinic, Mill Street. Two sessions a week are held at the Corporation Clinic for the treatment of venereal diseases in women and children, patients being referred to this clinic by the Medical Officers of the Ante-Natal and Child Welfare Centres, and also by general medical practitioners.

It is hoped that by instituting treatment for cases of gonorrhœa and of syphilis in pregnant women, the number of cases of ophthalmia neonatorum and congenital syphilis will decrease: 2,377 attendances were made by 224 patients during the year, compared with 2,945 attendances by 297 patients during 1934, and 1,917 attendances by 221 patients in 1933.

The following table gives an analysis of the cases treated:—

	1935	1934	1933
Syphilis	43	42	27
Gonorrhœa	56	52	49
Syphilis and Gonorrhœa .	15	17	13
Congenital Syphilis	31	30	15
Observation	79*	156*	117*
	224	297	221

*The reason for the fall in the number of observation cases is that prior to the opening of a treatment clinic at the Maternity Centre, New Cross Street, all patients suffering from vaginal discharge, whether gonorrhœa or not, were treated at Mill Street. The non-specific cases are now treated at New Cross Street. 299 patients received treatment there during 1935.

Pregnant women in attendance at this clinic are admitted to the Isolation Block of the Maternity Home when necessary.

Dining Centres and Work of Dining Superintendents. Dinners, provided by he Municipal Restaurants Department, were served to necessitous expectant nd nursing mothers at 4 centres each week-day throughout the year, and at a ifth centre from October 28th. 2,569 applications were granted during 1935, ompared with 2,749 in 1934.

The dietary is liberal and nourishing and is approved by the Medical Officer f Health ; the cost is 5d. per meal.

The following return shows the total number of dinners served at the respective entres :

	No. served.	*Average served per day.*
King's Hall	9,528	31
East Hull	11,492	38
West Hull	12,046	39
Queen's Hall	14,488	47
North Hull	679	13
1935	48,233	168
1934	53,352	174
1933	61,481	201

The increasing population of the North Hull Estate necessitated the opening f a Dining Centre in this area. The Centre was opened in the Parish Hall of St. Michael and All Angels Church on October 28th.

Dinners are served by the Dining Centre Superintendents. 3 of the superintendents are also Health Visitors. All applications for free dinners are investigated by the nursing staff. 44 visits and 76 re-visits to expectant mothers, 66 visits and 108 re-visits to nursing mothers, and 95 visits were paid to cases of measles, whooping cough, chicken-pox and mumps, 423 visits to toddlers, and 598 special visits were paid by one superintendent who was not a Health Visitor.

The Dining Centre Superintendent who was not a Health Visitor attended 98 sessions at the Infants' Welfare Clinics, 87 sessions at the Light Clinic, and 27 sessions at the Ante-Natal Clinic.

Toddlers' Dining Centres. Dinners have continued to be provided for necessitous children between the ages of 2 and 5 years at :

East Hull Clinic, Morrill Street.
West Hull Methodist Church, Cholmley Street, to Saturday, March 30th.

West Hull Clinic, Coltman Street, from Monday, April 1st.
King's Hall Clinic, Fountain Road.
Queen's Hall Clinic, Alfred Gelder Street.
And at St. Michael and All Angels Parish Hall, North Hull Estate, from Monday, October 28th.

Two thousand two hundred and seven applications were granted during 1935, compared with 2,359 in 1934.

During 1935, 53,418 dinners were served, compared with 53,166 in 1934, and 44,034 in 1933.

Supply of Milk and Nutritives. Supplies of nutritives are issued at cost price to expectant and nursing mothers who can afford to pay, and free when they cannot afford to pay even cost price. They may obtain also for their children milk and/or nutritives at cost price if able to pay, and free if they cannot afford cost price.

From February, 1934, dried milk has been available for all children up to 18 months of age attending the centres, and has continued to be available in cases over 18 months where a medical recommendation is made. This has caused a great increase in the number of applications.

The number of applications, renewable monthly, received for the free supply of milk and/or nutritives, was 14,587 (of these, 1,885 were first applications). 133 were not granted, as the income was above the scale. The number of applications dealt with in 1934 was 11,895, compared with 9,753 in 1933.

The total value of the free issues during the calendar year was £4,349, compared with £3,443 in 1934, and £2,662 in 1933.

Receipts from sales at cost price totalled £4,243, compared with £3,690 in 1934. The total number of issues was 157,791 in 1935, and 131,316 in 1934.

Particulars will be found in Appendix 38 (page 250).

Provision of Fireguards. In order to prevent deaths from burns and scalds, resulting from the absence of a fireguard, arrangements are in operation whereby fireguards may be purchased at a cost of 5s. 9d. and supplied to necessitous families, payment being made by instalments. A deposit of 9d. is usually made, and the balance is payable by weekly payments of 6d.

During the year, 349 applications were received, as against 308 in 1934; 290 ireguards were supplied in 1935, and 225 in 1934.

The gross cost of the fireguards supplied in 1935 was £84 16s. 10d., compared vith £64 6s. 1d. during 1934. The remaining applications were being dealt with at he end of the year.

During 1935, the total amount recovered in respect of fireguards, including hose supplied in previous years, was £64 0s. 3d., compared with £56 19s. 6d. luring 1934.

There were 3 fatal cases of burns and scalding in children (under the age of 5 years) in the course of the year.

A notice, drawing the attention of parents of young children to their obligations with regard to the provision of fireguards, is placed in each Infant Welfare Clinic.

Free or Assisted Services. The use made of the various free or assisted services provided by the Maternity and Child Welfare Scheme is exemplified in the following summary of applications dealt with during the year:—

		Not	*Total*	
Service applied for.	*Granted.*	*taken up.*	1935	1934
Maternity Home	1,249	112	1,361	1,274
Infants' Hospital	224	3	227	165
Free Midwife	335	73	408	472
Home Helps	295	202	497	497
Milk and/or Nutritives	14,454	133	14,587	11,895
Dinners (Mothers)	2,569	11	2,580	2,757
Dinners (Toddlers)	2,207	2	2,209	2,364
Medical Fees	215	103	318	343
Splints	—	—	—	—
Dentures	185	27	212	247
Spectacles	93	24	117	119
Fireguards	349	—	349	308
Convalescent Home	26	13	39	29
Gynæcology	127	—	127	76
1935	22,328	703	23,031	—
1934	19,955	591	—	20,546

Home Nursing. The nurses of the Hull Jubilee District Nursing Association continue to visit cases recommended by the Health Department, and give valuable assistance in nursing patients in their own homes. In the event of a case of ophthalmia, pemphigus or puerperal pyrexia occurring in the practice of a midwife, the midwife leaves the case, and arrangements are made for the mother and child to be attended by the District Nurse.

During the year, 2,502 visits were paid to 222 cases. In addition, 70 visits were paid to 4 cases which had not completed treatment at the end of 1934. Treatment in 7 cases had not been completed at the end of 1935. This compares with 1,713 visits to 177 cases in 1934, and 2,644 visits to 229 cases in 1933. The cases dealt with in 1935 are analysed below :—

	No. of Cases.	Cured.	Died.	Removed to Hosp.	No. of Visits.
Pemphigus or Suspected Pemphigus	51	46	1	4	527
Inflammation of Eyes	39	36	—	3	720
Threadworms	59*	54	—	—	381
Rise of Temperature (Puerperal)	9	5	—	4	94
Vaginal Discharge	11†	9	—	1	169
Pelvic Inflammation	15†	14	—	—	131
Measles	3	3	—	—	74
Suspended Midwives Cases .	27	27	—	—	329
Other	8	6	—	2	77
	222	200	1	14	2,502

† 1 refused treatment.
* 5 do.

Day Nurseries. The West Hull Day Nursery at 95 Coltman Street, and the East Hull Day Nursery at Moscow House, Holderness Road, continue to look after pre-school children whose mothers go to work each day. The charge is sixpence per day and fourpence each half-day, but this does not cover all expenses. The Corporation make a contribution of £260 per annum to the West Hull Nursery, and £300 per annum to the East Hull Nursery, and the deficit is defrayed by voluntary contributions.

The attendances during the year were :—

	West Hull.	*East Hull.*
Whole day	2,047	3,109
Half day	45	187
	2,092	3,296

Co-ordination of Work with other Institutions and Departments. The Clinic cards and health visitors' records of children reaching the age of 5 years are sent to the School Medical Department each month, in order that a medical history of the children shall be available for routine inspection purposes.

Inspectors of the Hull Branch of the National Society for the Prevention of uelty to Children visited 26 cases reported by the Department. 17 failed to tain the requisite medical treatment, 5 required supervision, and 4 were suffering om neglect. Of these, the children in 3 families were twice referred to the Society.

The Personal Service League has been most helpful in providing clothing, oes and blankets, for necessitous families.

The Health Visitors investigate all applications for help for expectant others or young children. Occasionally, other applications are investigated by embers of the Personal Service League Committee. The "Mother Humber" und granted extra nourishment or coal to 16 cases which were referred for help y the Department.

Children requiring splints were referred to the Guild of Brave Poor Things. he Guild undertake the care of all cripples in the City, and have organised a heme for the provision of splints ordered by the Orthopædic Surgeons at the arious clinics. This work is efficiently done, and is proving of inestimable benefit the crippled poor of the City.

Our thanks are due to all the voluntary societies which help the work of the epartment.

Care of Illegitimate Children. The York Diocesan Maternity Home, Linnæus treet, was opened in January, 1915, for young unmarried mothers under 25 years f age, of previous good character, for first cases only. The Home is approved by he Ministry of Health. The Corporation contribute a sum of £635 per annum owards the expenses of the Home.

In 1935, 63 girls and 43 babies have been in the Home; of this number 21 irls entered the Home in 1934, leaving 42 as the number of girls admitted in the ear under review. 3 babies died, and 3 were still-born.

Forty-five girls left the Home during the year. 14 went into service, 14 eturned to their parents or friends, 1 was sent to hospital for further treatment, returned to former employment, 4 were sent to a home for further training, and to Mother and Baby Homes, 4 were sent to Public Assistance Institutions, 1 went o the Mental Hospital, Willerby, and 4 refused to stay.

Thirty-two babies left the Home during the year.

Notice of removal of any child from the Home is sent to the Medical Officer f Health, and the child, if still in this area, is visited by a Health Visitor at requent intervals.

HEALTH EDUCATION.

MONTHLY BULLETIN—"HEALTH NEWS."

For the past nine years the Health Department has published each month a magazine devoted to public health matters. The magazine is entitled the Hull "Health News" and it comprises the monthly edition of the publication "Better Health" issued by the Central Council for Health Education, together with local and topical articles giving recent information affecting public health matters in Hull.

Each year approximately 24,000 copies are obtained and distributed. A large proportion of this number is taken by the mothers who attend the Corporation Clinics. Many copies are utilised by subscribers, by Factory Welfare and similar organisations, and by direct sales. In addition, the senior scholars of the Secondary and Elementary Schools in the City are provided with copies from the numbers which remain available after sales and other distribution. By this means, the magazine is received into the homes of people calculated to obtain the most benefit from its contents. The circulation remains steady and consistent. I believe that much good results from the advice and information contained in the magazine.

Valuable assistance is afforded by the local press who quote or reprint many of the articles on local health matters which appear in "Health News," thereby widening immensely the field of publicity. This opportunity is accordingly taken to acknowledge the assistance which the local Press have always placed at the disposal of the Health Department in matters which affect the public health.

LECTURES AND TALKS ON HEALTH SUBJECTS.

During the year, 72 lectures and addresses were given (mostly in the evenings) by members of the staff of the Health Department to various organisations in and around the City. The organisations addressed were representative of all phases of educational, social and philanthropic activities, and the lectures, etc., dealt with the many and varied subjects that come within the purview of the Health Department.

METEOROLOGICAL REPORT FOR THE YEAR 1935.

1935.	At Nine a.m. Local Time. Mean Reading of				Mean Relative Humidity.	At Nine p.m. Local Time. Reading of Self-registering Thermometers.				Mean Temperature at 9 p.m. Readings	Underground Temperature.		Total Bright Sunshine.	Directions of the Wind.								Total Rainfall.
	Barometer.	Attached Therm.	Dry Bulb Thrm.	Wet Bulb Thrm.		Max. in Air.	Min. in Air.	Max. in Rays of Sun.	On Grass.		At 1 ft.	At 4 ft.		N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	
	in.	deg.	deg.	deg.	%	deg.	deg.	deg.	deg.	deg.	deg.	deg.	hours.									in.
January	30·242	48	39·9	38·2	84	45	38	59	31	41	40·5	45·5	42·3	6	7	....	1	....	2	11	4	1·85
February	29·661	50	43·0	40·2	78	48	38	67	34	43	41·2	43·8	43·7	2	2	..	1	1	5	9	7	2·97
March	30·180	52	44·5	42·7	84	51	40	81	34	45	42·5	43·6	93·5		2	5	6	2	4	7	4	0·66
April	29·773	54	47·8	44·0	73	53	41	96	37	47	46·4	45·5	138·1	3	7	1	3	3	2	7	2	2·06
May	30·213	57	52·2	45·7	64	55	44	108	38	49	51·9	48·6	216·5	5	17	4	2	1		1	1	0·49
June	30·037	65	62·0	57·3	72	68	53	117	48	60	59·3	52·3	198·3	....	1	3	3	8	10	4	1	2·14
July	30·166	68	65·9	59·0	68	72	56	121	50	64	65·9	58·3	254·0	3	3	2	5	1	4	8	5	0·22
August	30·052	68	65·9	60·1	73	74	55	120	49	64	65·4	59·9	199·0	4	2	....	3	1	7	5	4	1·91
September	29·861	63	58·4	54·3	76	64	50	105	45	57	57·6	58·3	138·5	1	2		1	6	7	8	2	4·21
October	29·794	60	49·8	46·9	80	56	44	84	39	50	49·7	53·8	93·2	3		1	2	3	9	7	4	3·58
November....	29·740	52	44·9	43·2	85	49	41	61	36	45	44·6	49·4	39·1	1		3	3	6	5	7	1	3·72
December	29·616	46	37·3	35·8	91	41	35	50	28	38	37·6	44·8	45·2	1	4	2	3	3	3	10	3	2·24
Total or Average	29·945	57	51·0	47·3	74	56	44	89	39	50	50·2	50·3	1501·8	29	47	21	33	35	58	84	38	26·05

APPENDIX 1—*Continued.*

METEOROLOGY.

Climatological Station, Pearson Park.

Eight feet above sea level.

	1935.	1934.
Highest Mean Temperature	85 deg. 10th July, 8th and 21st Aug.	85 deg. 11th July
Lowest Mean Temperature	22 deg. 24th Dec.	28 deg. 26th Feb.
Total Rainfall	26·05 ins.	21·30 ins.
No. of days on which rain fell	159	171
No. of sunless days	61	73
No. of hours of bright sunshine	1501·8	1390·4

Direction of prevailing wind :—

	N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.
1935	29	47	21	33	35	58	84	38
1934	21	35	19	17	52	83	87	27

THIRD QUARTERS.

	1935.	1934.
Mean Atmospheric Temperature	62 deg.	62 deg.
Mean Temperature 1 ft. below the ground	63·0	62·0
Mean Temperature 4 ft. below the ground	58·8	57·9
Total amount of bright sunshine in hours	591·5	594·3
Amount of rain	6·34 ins.	5·35 ins.

APPENDIX 2.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1935 AND PREVIOUS YEARS.

Year.	Population estimated for each Year.	Births.			Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Un-corrected Number.	Nett.				Of Non-residents registered in the District.	Of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
			Number.	Rate.	Number.	Rate.			Number.	Rate per 1000 Nett Births.	Number.	Rate.
1930	311,800	6382	6288	20·6	3961	13·0	180	52	434	69	3833	12·4
1931	315,200	6117	6040	19·2	4283	13·6	180	65	489	81	4168	13·2
1932	318,200	6189	6108	19·2	3890	12·2	188	60	414	68	3762	11·8
1933	319,900	5810	5740	17·9	4301	13·4	189	74	440	77	4186	13·1
1934	319,600	5961	5859	18·3	3748	11·7	168	64	375	64	3644	11·4
1935	322,200	6022	5927	18·4	4038	12·6	208	82	428	72	3912	12·2

NOTE.—The birth and death-rates have, at the request of the Registrar-General, for the reasons stated at the foot of Appendix 13, (p. 164) been worked on an adjusted population of 321,325.

APPENDIX 3.

TABLE SHOWING THE BIRTH-RATE, DEATH-RATE, Etc., IN THE VARIOUS WARDS.

District	Estimated Population.	Area in Acres, Land and Inland Water.	Persons to an Acre.	Births.	Deaths.	Birth-rate per 1,000 of Population.	Death-rate from all causes per 1,000 of population.	Deaths under one year per 1,000 Births.	Death-rate from six Zymotic Diseases, excluding Diarrhœa & Enteritis.	Death-rate from Diarrhœa and Enteritis.	Death-rate from Bronchitis and Pneumonia per 1000 of Population.	Death-rate from Pulmonary Tuberculosis per 1000 of Population.	Death-rate from Non-Pulmonary Tuberculosis per 1000 of Population
Albert	17251	285	60·5	399	198	23·1	11·5	58	0·2	0·2	1·7	0·7	0·3
Alexandra	20220	598	33·8	449	221	22·2	10·9	69	0·4	0·1	1·0	0·5	0·1
Beverley	12371	993	12·4	132	136	10·7	11·0	83		0·1	0·7	1·1	0·2
Botanic	16529	248	66·6	225	184	13·6	11·1	62	0·1	0·2	1·3	0·4	0·1
Coltman	21129	220	96·0	431	241	20·4	11·4	86	0·2	0·4	1·1	0·7	0·3
Drypool	16500	381	43·3	313	191	19·0	11·6	79	0·4	0·8	1·3	0·7	0·1
East Central	15083	170	88·7	278	160	18·4	10·6	68	0·4	0·1	1·2	0·9	0·1
Marfleet	12543	1401	8·9	260	126	20·7	10·0	31	0·4	0·5	0·5	0·8	0·1
Myton	15215	263	57·8	231	228	15·2	15·0	121	0·5	0·3	2·2	0·8	0·1
Newland	13470	705	19·1	100	147	7·4	10·9	90	—	0·1	0·5	0·7	0·1
North Newington	18445	278	66·3	396	220	21·5	11·9	53	0·3	0·1	1·2	0·6	—
Paragon	9564	220	43·5	101	153	10·6	16·0	198	0·6	0·3	1·3	0·8	0·1
Park	11468	214	53·6	96	179	8·4	15·6	146	0·3	—	1·0	0·3	0·2
Pickering	14372	1472	9·8	214	157	14·9	10·9	65	0·5	0·1	0·8	0·5	0·3
St. Andrew's	19091	1075	17·7	332	158	17·4	8·3	93	0·2	0·4	0·6	0·4	0·1
Southcoates	19281	202	95·4	461	236	23·9	12·2	65	0·4	0·3	1·6	0·9	0.4
South Newington	16481	332	49·6	291	260	17·6	15·8	62	0·1	0·5	1·7	1·1	0·2
Stoneferry	12797	1610	7·9	244	121	19·1	9·5	25	0·1	0·1	0·3	0·7	0·1
Sutton	7411	2070	3·6	98	85	13·2	11·5	71	0·1	—	0.7	0·2	0·4
University	15489	1576	9·8	577	264	36·6	17·0	55	0·4	0·4	1·2	1·8	0·4
West Central	16615	120	138·4	299	247	18·0	14·8	100	0·2	0·2	1·4	0·9	0·2
Whole City	321325*	14433	22·3	5927	3912	18·4	12·2	72	0·3	0·3	1·2	0·7	0·2

* In the births and deaths for 1935 are included those that occurred in the old area during the 3 months immediately preceding the extension of the City on the 1st April of that year. Therefore, whilst the population of the area of the City as constituted at the end of 1935 was 322,200, the annual birth and death-rates for the same year have, at the request of the Registrar General, been calculated on an adjusted population of 321,325 to make allowance for the change of area. Consequently, the Ward populations have had to be adjusted accordingly.

APPENDIX 4.

BIRTH-RATE, DEATH-RATE AND ANALYSIS OF MORTALITY DURING THE YEAR 1935.

—	Birth-rate per 1,000 Total Population.		Annual Adjusted Death-Rate per 1,000 Population.										Rate per 1,000 Births.		Percentage of Total Deaths.			
	Live Births	Still-Births	All Causes.	Enteric Fever.	Smallpox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.		Diarrhœa and Enteritis (under Two years).	Total Deaths under One year.	Causes of Death certified by Registered Medical Practitioners	Inquest Cases.	Certified by Coroner after P.M. No Inquest.	Uncertified Causes of Death.
England and Wales ...	14·7	0·63	11·7	0·00	—	0·03	0·01	0·04	0·09	0·18	0·54		5·6	57	90·4	6·4	2·2	1·0
121 County Boroughs and Great Towns, including London ...	14·8	0·61	11·8	0·00	—	0·04	0·01	0·05	0·09	0·16	0·52		7·6	62	90·9	5·8	2·8	0·5
140 Smaller Towns (Estimated Resident Populations 25,000 to 50,000 at Census 1931)	14·8	0·64	11·2	0·00	—	0·03	0·01	0·03	0·09	0·18	0·53		4·8	55	91·9	5·5	1·6	1·0
London	13·3	0·44	11·4	0·00	—	0·00	0·01	0·04	0·06	0·11	0·55		11·3	58	87·7	6·3	5·9	0·1
Hull *	18·4	0·76	13·4	0·00	—	0·09	0·02	0·09	0·11	0·06	0·59		13·0	72	89·4	6·3	4·3	—

* The adjusted death rates for Hull are calculated by multiplying the crude death-rates (deaths per 1000 of the population) by the Registrar General's comparability factor of 1·10. For explanatory note see page 26.

APPENDIX 5.—PRINCIPAL CAUSES OF DEATH.

Cause of Death.	Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District.									Nett Deaths (in Wards) of "Residents" whether occurring within or without the District.																					Total Deaths in Institutions.
	All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upward	Albert.	Alexandra.	Beverley.	Botanic.	Coltman.	Drypool.	East Central.	Marfleet.	Myton.	Newland.	N. Newington.	Paragon	Park.	Pickering.	St. Andrew's.	Southcoates.	S. Newington.	Stoneferry.	Sutton.	University.	W. Central.	
ll Causes —Certified	3912	428	68	89	114	150	415	1025	1623	198	221	136	184	241	191	160	126	228	147	220	153	179	157	158	236	260	121	85	264	247	1990
—Uncertified	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1 Enteric Fever	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1
2 Measles	28	10	5	10	3	—	—	—	—	2	4	—	—	1	3	4	1	2	—	1	1	—	2	—	3	—	—	—	2	2	20
3. Scarlet Fever	6	—	—	2	2	1	1	—	—	—	—	—	2	—	—	—	—	—	—	1	1	—	1	—	1	—	—	—	—	—	5
4. Whooping Cough	27	12	7	6	2	—	—	—	—	1	—	—	—	1	3	1	4	5	—	—	1	1	—	1	2	1	2	1	2	1	18
5. Diphtheria...	34	1	5	16	11	—	1	—	—	1	4	—	—	3	1	1	—	1	—	3	2	2	4	3	1	5	—	—	2	1	32
6. Influenza	18	—	—	—	—	2	3	6	7	2	—	—	2	2	—	—	1	—	2	—	1		1	—	2	—	—	—	2	3	6
7. Encephalitis Lethargica	4	—	—	—	—	2	1	1	—	—	—	—	—	—	—	—	2	—	1		—	—	—	1	—	—	—	—	—	—	2
8 Cerebro-spinal Fever	6	2	—	—	3	—	1	—	—	—	1	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	1	1	—	1	5
9. T.B. of the Respiratory System ...	244	1	1	3	6	57	100	67	9	12	10	14	6	15	12	13	10	13	9	12	8	4	7	8	18	19	9	2	28	15	99
9A T.B. Meningitis	36	5	4	7	8	6	4	2	—	2	1	—	2	4	—	1	—	—	2	—	—	1	3	3	7	3	1	1	2	3	36
0. Other Tuberculous Diseases	25	—	1	3	6	8	5	1	1	3	1	2	—	3	1	—	2	2	—	—	1	1	1	—	—	1	—	2	5	—	20
1. Syphilis	35	3	—	—	2	—	3	19	8	2	1	2	2	—	3	2	2	2	1	1	2	2	—	3	2	4	2	—	1	1	30
2 General Paralysis of the Insane ..	24	—	—	—	—	—	7	14	3	2	—	1	1	2	1	1	1	—	3	1	—	2	1	—	1	1	—	—	1	5	18
3. Cancer, Malignant Disease	470	—	1	—	1	3	32	234	199	17	34	15	28	25	16	17	19	18	14	39	10	25	22	21	31	30	13	12	30	34	256
4 Diabetes	40	—	—	1	1	—	4	12	22	2	1	6	2	5	2	—	—	1	1	5	1	2	3	1	2	1	1	2	1	1	16
5. Cerebral Hæmorrhage	202	—	—	—	—	—	4	61	137	9	10	8	15	10	8	7	8	4	14	15	8	11	9	5	7	16	7	4	12	15	107
6. Heart Disease	790			5	9	8	45	218	505	19	36	20	43	54	29	26	15	63	34	40	37	40	36	37	33	58	28	12	46	54	284
7. Aneurysm	11	—	—	—	—	—	—	8	3	—	1	—	1	2	1	—	1	2	—	1	—	—	1	—	—	1	—	—	—	—	6
8 Other Circulatory Diseases	173	—	—	—	—	—	5	44	124	7	5	5	8	12	5	7	7	13	13	10	13	11	4	6	7	9	7	7	9	8	74
9. Bronchitis	102	9	1	2	—	1	6	25	58	4	5	3	6	6	8	3	1	10	3	13	1	4	2	1	9	11	2	—	2	8	34
9A Broncho Pneumonia	185	72	23	10	6	1	8	31	31	20	8	4	10	11	12	12	2	16	2	5	11	6	2	7	19	13	1	2	8	11	115
0. Pneumonia (all forms excluding Broncho Pneumonia)	86	14	3	4	3	3	17	32	10	5	7	2	6	4	1	3	1	7	2	4	1	2	8	4	4	5	1	3	8	5	31
1. Other Respiratory Diseases	26	3	—	—	1	1	4	9	8	—	1	1	1	1	1	2	—	4	—	—	3	2	2	—	2	2	2	—	1	1	10
2 Peptic Ulcer	45	—	—	—	1		10	26	8	2	4	—	1	3	—	2	2	4	3	3	—	1	2	—	5	1	2	3	4	3	31
3. Diarrhoea (all ages)	88	69	8	4	2	—	—	1	1	4	3	1	3	8	14	2	7	5	1	2	3	—	2	7	6	9	1	—	7	3	69
4. Appendicitis	22	—	—	1	6	—	4	8	3	2	1	1	—	2	—	—	—	2	1	1	—	—	1	1	3	4	1	—	1	1	21
5. Cirrhosis of the Liver	12	—	—	—	—	—	1	3	8	—	—	—	1	1	—	1	—	—	2	—	1	2	—	—	1	—	1	1	1	—	7
6 Other Diseases of the Liver	8	—	—	—	—	—	1	3	4	—	—	—	2	—	—	1	—	1	—	1	—	1	—	1		—	—	—	—	1	6
7. Other Digestive Diseases	54	3	—	—	—	1	7	25	18	1	4	1	2	1	1	3	1	7	5	1	3	2	2	4	4	—	4	1	3	4	45
8. Acute and Chronic Nephritis	121	1	—	1	2	1	14	42	57	7	5	6	6	6	4	7	—	9	6	10	3	7	5	7	3	8	4	1	10	7	63
9. Puerperal Sepsis	5	—	—	—	—	—	5	—	—	—	1	—	—	—		—	—	—		1	—	1	1	1	—		—	—	—	—	6
0 Other Puerperal Causes	10	—	—	—		1	6	—	—	1	—	—		—	1	—	1	1		1	—	1	—	2	—	—		—	2		7
1. Congenital Debility and Malformations, Premature Birth	201	198	2	1	—		—	—	—	12	13	7	8	22	12	6	5	8	6	9	9	6	6	8	11	11	4	3	19	16	94
2 Senility	251	—			—	—	—	—	251	4	20	16	5	7	30	16	10	6	10	8	10	16	4	5	19	13	10	10	15	17	121
3A Drowning (excluding Suicide)	31	—	—	—	2	7	11	9	2			1	1	3	1	—	1	1	1	3	3	1	2	4	2	5	—	—	—	2	—
3. Suicide	37	—	—	—	—	3	13	14	7	2	3	1	—	3	1	1	—	4	1	2	—	—	3	—	3	5	1	3	3	1	4
4. Other Violence	108	2	1	6	15	14	22	16	32	4	11	6	6	9	1	5	3	2	—	4	5	3	3	8	6	5	6	3	6	9	71
5A. Alcoholism	1	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
B Anthrax	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
C. Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Other defined Diseases	342	23	6	7	22	21	67	90	103	19	25	12	11	12	15	16	16	15	10	23	12	22	16	9	22	19	10	11	30	14	219
6. Causes ill-defined or unknown	3						1	1	1		1		—	—		—	—	—	—	—	—	—	1	—	—			—	1	—	1
Totals	3912	428	68	89	114	150	415	1025	1623	198	221	136	184	241	191	160	126	228	147	220	153	179	157	158	236	260	121	85	264	247	1990

APPENDIX 6.

INFORMATION REQUIRED BY THE MINISTRY OF HEALTH REGARDING NURSING ARRANGEMENTS, HOSPITALS, CLINICS, TREATMENT CENTRES, AND OTHER INSTITUTIONS AVAILABLE FOR THE DISTRICT.

1. Professional Nursing in the Home.

The Hull Jubilee District Nursing Association employs a staff of 24 nurses and 1 superintendent. They attend infectious cases by agreement with the Corporation for which an annual payment of £100 is made. The total number of cases attended by these nurses during the year was 3,056, and the number of visits paid, 91,828: the number of cases attended on the recommendations of the Corporation was 222, and the number of visits 2,502.

2. Midwives. (See page 123).

The Corporation employ 4 whole-time midwives to attend necessitous women in their homes. 3 pupil midwives are also attached to this service. 331 confinements were attended by them in 1935. 81 midwives practise in the City, 2 of whom are untrained.

3. Clinics and Treatment Centres.

Name.	Where Held.	Times.	
(a)		Doctor's Sessions.	Weighing Sessions.
Infant Welfare Clinic ...	69 Coltman Street	Monday, Thursday, Friday, 2 p.m.	Wednesday, 2 p.m.
Do. do.	King's Hall, Fountain Road.	Monday, Wednesday, Friday, 2 p.m.	
Do. do.	Queen's Hall, Alfred Gelder Street	Tuesday, Friday, 2 p.m.	Monday, 2 p.m.
Do. do.	East Hull Clinic, Morrill Street	Wednesday, Thursday, Friday, 2 p.m.	
Do. do.	Wesleyan Mission Rooms, Carlton St.	Tuesday, Wednesday, 2 p.m.	
Do. do.	Wesleyan Mission Rooms, Marfleet	Friday, 2 p.m.	
Do. do.	Parish Hall, Church of Transfiguration, Albert Avenue	Thursday, Friday, 2 p.m.	
Do. do.	Wesleyan Church Rooms, Cottingham Road	Wednesday, 2 p.m.	
Do. do. ...	Methodist Rooms, Sutton	Tuesday, 2 p.m.	
Do. do.	Social Hall, Greenwood Avenue	Thursday, 2 p.m.	
Toddlers' Clinic	East Hull Clinic, Morrill Street	Monday, 2 p.m.	
Do. do.	King's Hall, Fountain Road	Tuesday, 2 p.m.	
Do. do.	69 Coltman Street	Do. do.	
Ante-Natal Clinic	New Cross Street		
	For Municipal Midwives' cases.	Monday, 2 p.m.	
	For Maternity Home cases.	Tuesday, Thursday, 2 p.m.	
	For cases referred by Doctors and Midwives.	Tuesday, Thursday, 9-30 a.m.	
Do. do.	East Hull Clinic, Morrill Street.	Wednesday, 9-30 a.m	
Post-Natal clinic	New Cross Street	First and Third Friday each month, 2 p.m.	
Gynæcological Clinic	New Cross Street	First and Third Wednesday each month. 9-30 a.m.	
Artificial Sunlight Clinic	69 Coltman Street	Monday, Tuesday, Thursday and Friday, 9-30 a.m.	
Do. do.	East Hull Clinic, Morrill Street.	Tuesday & Friday, 9-30 a.m.	
X-Ray Clinic	Do. do.	Monday, Saturday, 9 a.m. to 12 noon. Thursday, 9 a.m. to 12 noon and 2 p.m to 5 p.m.	
Orthopædic do.	Do do.	Monday to Friday, 9 a.m. to 12 noon and 2 p.m. to 5 p.m. Saturday, 9 a.m. to 12 noon. Inspections by Orthopædic Surgeons, as arranged	

APPENDIX 6—*Continued.*

(*b*) Day Nurseries.

There are two Day Nurseries, one at 95 Coltman Street and another at Moscow House, Holderness Road. They are both under voluntary management.

(*c*) Tuberculosis. Dispensary, 100 Coltman Street, hours of attendance, Tuesdays, Wednesdays and Thursdays, 2 p.m. to 5 p.m.; and Dispensary, Durham House, 324 Holderness Road, hours of attendance, Wednesdays, Thursdays and Fridays, 2 p.m. to 5 p.m.

There are also Morning Clinics, commencing 10 o'clock, on Mondays, Tuesdays, Wednesdays, Thursdays and Fridays at No. 100 Coltman Street, and on Mondays, Tuesdays and Fridays at Durham House for those who cannot attend in the afternoon.

Evening Clinics are held on Thursdays, in alternate weeks, at Durham House and 100 Coltman Street, commencing at 6 p.m.

(*d*) V.D. Treatment Centre, Mill Street. Men's Clinic: Monday, 11-30 a.m. to 12-30 p.m. and 5 to 7 p.m.; Tuesday, 11-30 a.m. to 12-30 p.m. and 5 to 7 p.m.; Wednesday, 5 to 7 p.m.; Thursday, 11-30 a.m. to 12-30 p.m.; and 2 to 4 p.m.; Friday, 11-30 a.m. to 12-30 p.m. and 5 to 7 p.m.; Saturday, 11-30 a.m. to 1-30 p.m. Women's and Children's Clinics: Special Clinic Monday, 2 to 3 p.m.; Tuesday, 2 to 4 p.m.; Wednesday, 11-30 a.m. to 12-30 p.m. and a special Clinic 2 to 3 p.m.; Thursday, 5 to 7 p.m.; and Friday, 2 to 4 p.m.

(*e*) School Clinics.

NAME.	WHERE HELD.	TIMES.
Inspection Clinic....	74 Beverley Road	Monday, Wednesday and Thursday, 1-45 to 5.
Do.	114 Coltman Street	Monday, Wednesday and Friday, 1-45 to 5.
Do.	Blenkin Street	Monday and Thursday, 1-45 to 5.
Do.	Morrill Street	Tuesday and Friday, 1-45 to 5.
Do.	Hall Road School....	Thursday, 1-45 to 5.
Do.	Endyke Lane West School	Wednesday, 9 to 12.
Minor Ailments Treatment Clinic	74 Beverley Road	Monday to Friday, 9 to 12 and 1-45 to 5. Saturday, 9 to 12.
Do. do.	114 Coltman Street	Do. do.
Do. do.	Blenkin Street	Do. do.
Do. do.	Morrill Street	Do. do.
Do. do.	Hall Road School....	Monday to Friday, 1-45 to 5. Saturday, 9 to 12.
Do. do.	Endyke Lane West School	Monday to Friday, 9 to 12.
Dental Clinic (Three Dentists)	74 Beverley Road	Monday to Friday, 9 to 12 and 1-30 to 4-30. Saturday, 9 to 12.
Do. (Two Dentists)	114 Coltman Street	Do. do.
Do. do.	Morrill Street	Do. do.
Ophthalmic Clinic (Refraction work and prescription of spectacles).	74 Beverley Road	Monday, 9-30 to 11-30. Thursday, 9-30 to 11-30. Friday, 10 to 11. Saturday, 9 to 12. Additional Clinics as arranged.
Do. ...	114 Coltman Street	As arranged.
Do. ...	Morrill Street	
Aural Clinic ..	74 Beverley Road	Friday, 2 to 4, as arranged.
Do.	114 Coltman Street	Tuesday, 2 to 4, as arranged.
Do. ...	Morrill Street	Tuesday, 10 to 12, as arranged.
X-Ray (Ringworm) Clinic	74 Beverley Road....	Tuesday and Thursday, 2 to 5, as arranged.
Orthopædic Clinic	74 Beverley Road....	Monday to Friday, 9 to 12 and 2 to 5. Saturday, 9 to 12. Inspections by Orthopædic Surgeons, as arranged.
Rheumatism and Heart Clinic.	74 Beverley Road.... .... Morrill Street	Thursday, 2 to 5, as arranged.

APPENDIX 7.—CLASSIFICATION OF HOSPITAL ACCOMMODATION AVAILABLE FOR HULL CITIZENS IN

Name of Hospital.	Situation.	Purpose.	No. of Beds.			Total.	Management.	No. of Medical and Nursing Staff.	
			M.	F.	C.			Medical.	Nursing.
City Hospital	Castle Hill, Cottingham	Infectious Diseases		215		215	Kingston upon Hull Corporation	4	59
Evan Fraser Hospital	Sutton-on Hull	Smallpox		150		150	Do.		10
Tuberculosis Sanatorium ...	Castle Hill, Cottingham	Tuberculosis	47	36	46	129	Do.		29
Municipal Maternity Home & Infants' Hospital	Hedon Road, Hull	Maternity and Dietetic Diseases in Infants under 1 year	—	74	30	104	Do.	2	29
Anlaby Road Institution Hospital	188 Anlaby Road	General Hospital	290	205	50	545	Do.	3	113†
Beverley Road Institution Hospital	160 Beverley Road	Do.	177	139	84	400	Do.	3	114†
City Mental Hospital	Willerby, East Yorks.	Mental Cases	408	469	—	877	Do.	4	156
Tilworth Grange ...	Sutton-on-Hull	Female Mental Defectives	—	163	—	163	Do.	1 G.P. pt.-time	18
Mid-Yorkshire Institution	Whixley, York.	Male Mental Defectives	68	—	—	68	Hull, Leeds and York Corporations.		
Hull Royal Infirmary	Prospect Street, Hull	General Hospital		267		267	Voluntary Hospital		
Do.	Annexe—Sutton-on-Hull	Do.		100		100	Do.		
Do.	Annexe—Withernsea, E. Yorks.	Convalescent		30		30	Do.		
Victoria Hospital for Sick Children	Park Street	General Hospital for Children	—	—	129	129	Do.		
Do.	Convalescent Home, Hornsea	Convalescent Children	—	—	41	41	Do.		
Hull Hospital for Women	Cottingham Road, Hull	Surgical Cases. Women only.	-	27	—	27	Do.		
York Diocesan Maternity Home ...	Linnæus Street, Hull	Unmarried Mothers and Babies	—	22	22	44	Do.		
Yorkshire Home for Mothers & Babies	Withernsea, E. Yorks.	Convalescent	—	as required			Do.		
Yorkshire Children's Orthopædic Hospital	Kirbymoorside	Orthopædic Cases	—	—	11	11	Joint Board with other Yorkshire Authorities		
Hull & E. Riding Convalescent Home	Withernsea, E. Yorks.	Convalescent	—	80	—	80	Voluntary Hospital.		

† Including nursing staff in mental wards.

APPENDIX 8.

STATEMENT OF THE HOSPITAL BEDS AVAILABLE IN THE CITY DURING 1935.

HOSPITAL.	General Medical.		General Surgical.		Children.		Maternity.	Venereal Diseases.		Tuberculosis.		Mental.		Mental Defectives.		Orthopaedic.		Ear, Nose and Throat.		Puerperal Fever and Pyrexia.	Ophthalmia Neonatorum.		Chronic Sick.		Other.		Infectious Diseases.		Small Pox.		TOTAL.
	M.	F.	M.	F.	M.	F.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Anlaby Road Hospital	80	51	35	31	50		—	—	—	16	16	55	58	13	—	In general wards				—	—	—	63	32	28	17	—	—	—	—	545
Beverley Road Hospital	40	20	41	40	70		—	14	16	15	10	20	29	—	—	do.				—	—	—	28	29	26	2	—	—	—	—	400
Hull Royal Infirmary.																															
Hull Royal Infirmary	68*		121†		34		—	4		Inc. in * & †		—	—	—	—	Inc in †		21		Inc. in *	Inc. in *		—	—	19††		—	—	—	—	267
Sutton Annexe	43		49		8		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	100
Withernsea	30		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	30
Victoria Hospital for Sick Children.																															
Victoria Hospital	—	—	—	—	129		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	129
Hornsea Convalescent Home ...	—	—	—	—	41		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	41
Hull & East Riding Convalescent Home	80		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	80
Hull Hospital for Women	—	—	—	27	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	27
York Diocesan Maternity Home ...	—	—	—	—	22		22	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	44
Yorkshire Home for Mothers and Babies	As required		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Municipal Maternity Home and Infants' Hospital ...	—	—	—	—	30		60	—	2	—	—	—	—	—	—	—	—	—	—	10	As required		—	—	—	2	—	—	—	—	104
City Hospital	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	215		—	—	215
Tuberculosis Sanatorium ...	—	—	—	—	—	—	—	—	—	72	57	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	129
Evan Fraser Hospital	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	150		150
City Mental Hospital	—	—	—	—	—	—	—	—	—	—	—	408	469	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	877
Tilworth Grange	—	—	—	—	—	—	—	—	—	—	—	—	—	—	163	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	163
Mid-Yorkshire Institution, Whixley, York	—	—	—	—	—	—	—	—	—	—	—	—	—	68	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	68
Yorkshire Children's Orthopaedic Hospital, Kirbymoorside ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	11		—	—	—	—	—	—	—	—	—	—	—	—	—	11
TOTAL	412		344		384		82	36		186		1039		244		11		21		10	—		152		94		215		150		3380

††Ophthalmic Cases.

APPENDIX 9.

PUBLIC ASSISTANCE INSTITUTIONS.

he following statistics relate to the two Institutions which were transferred to the City Council on the 1st April, 1930, under the provisions of the Local Government Act, 1929.

Anlaby Road Institution—House Portion.

ccommodation available—Men, 210. Women, 169. Children, Nil. Total, 379.

o. of persons in the House (excluding casuals) on the 1st January, 1935	180
o. do. do. do. 31st December, 1935	177
aily average number of persons in the House during the year	181
ggregate number of days during which Inmates were resident in the House in 1935....	66,291
o. of Indoor Funerals during 1935	93

Anlaby Road Institution—Admissions to House.

1935	Casuals.				Inmates.				
	Men.	Women	Childrn	Total.	Men.	Women	Childrn. 3–16	Inf'ts. 0–3	Total.
nuary	—	—	—	—	6	2	—	—	8
bruary	—	—	—	—	4	1	—	—	5
arch	—	—	—	—	14	1	—	—	15
pril	—	—	—	—	7	2	—	—	9
ay	—	—	—	—	3	—	—	—	3
ne	—	—	—	—	4	3	—	—	7
ly	—	—	—	—	4	2	—	—	6
gust	—	—	—	—	7	2	—	—	9
ptember	—	—	—	—	9	—	—	—	9
tober	—	—	—	—	16	—	—	—	16
vember	—	—	—	—	13	1	—	—	14
cember	—	—	—	—	9	—	—	—	9
Totals	—	—	—	—	96	14	—	—	110
1934	—	—	—	—	106	14	—	—	120
1933	—	—	—	—	88	22	—	—	110

APPENDIX 9—*Continued.*

BEVERLEY ROAD INSTITUTION (INCLUDING MARGARET STREET NURSERY)—HOUSE PORTION.

Certified Accommodation (House)—300 Men. 175 Women. 30 Children. Total 505.

Actual Accommodation available on December 31st, 1935—
301 Men. 142 Women. 36 Children. Total 479.

*No. of persons in the House on the 1st January, 1935 .... (including 1 for which another authority was responsible)	411
* Do. do. 31st December, 1935 .... (including 1 for which another authority was responsible)	418
Daily average number of persons in the House during the year	369
Aggregate number of days during which Inmates were resident in the House in 1935	134,785
Total number of admissions during 1935 for which other authorities were responsible	41
Total number of persons sent by this Authority to other Institutions	43
No. of persons in other Institutions on the 1st January, 1935, for which this Authority is responsible Patrington	6
Do. do. do. 31st December, 1935 do. do.	3
No. of Indoor Funerals during 1935	69
No. of casuals in the Institution on the 1st January, 1935	23
Do. do. do. 31st December, 1935	31
No. of casuals transferred to the House as inmates during 1935	92
Do. do. Hospital as patients during 1935	75

**Excluding casuals.*

BEVERLEY ROAD INSTITUTION—ADMISSIONS TO HOUSE.

1935.	Casuals.				Inmates.				
	Men.	Women	Childrn.	Total.	Men.	Women	Childrn. 3–16	Inf'ts. 0–3	Total.
January	320	2	—	322	39	2	—	4	45
February	313	2	2	317	37	4	1	11	53
March	417	2	—	419	25	2	—	6	33
April	350	2	—	352	28	6	—	6	40
May....	336	4	1	341	30	—	—	6	36
June	375	4	—	379	28	2	—	3	33
July	278	3	—	281	25	2	1	6	34
August	442	2	2	446	36	1	—	—	37
September	376	—	—	376	28	4	—	10	42
October	346	6	—	352	33	2	—	1	36
November	425	6	1	432	58	2	—	6	66
December	358	3	—	361	50	4	—	3	57
Totals	4336	36	6	4378	417	31	2	62	512
1934	4354	67	1	4422	556	36	4	54	650
1933	4951	96	11	5058	763	42	1	71	877

APPENDIX 10.

INSTITUTION HOSPITALS.

	Anlaby Road	Beverley Road
otal number of beds in Hospital	545	400
aily average number of patients in Hospital during year	519	415
ggregate number of days during which the Hospital beds were occupied in 1935	189,813	152,469
otal number of patients admitted	3619	3747
,, ,, ,, discharged	2858	3166
,, ,, deaths	705	619
,, ,, births in hospital	2	2
,, ,, stillbirths	1	0

TABLE SHOWING MONTHLY ADMISSIONS IN 1935.

	Anlaby Road	Beverley Road
nuary	323	347
ebruary	300	296
arch	341	354
pril	301	337
ay	319	339
ne	281	261
ly	290	282
ugust	305	310
ptember	282	303
ctober	299	323
ovember	270	280
ecember	308	315
Totals for 1935	3619	3747
Totals for 1934	3264	3118

SURGERY—TABLE SHOWING NUMBER OF PATIENTS RECEIVING OPERATIVE TREATMENT IN 1935.

	Anlaby Road	Beverley Road
nuary	112	56
bruary	93	50
arch	97	59
ril	75	67
ay	104	66
ne	92	47
ly	103	61
gust	98	70
ptember	79	62
tober	103	93
ovember	81	57
cember	70	53
Totals for 1935	1107	741
Totals for 1934	952	538

APPENDIX 10—*Continued.*

INSTITUTION HOSPITALS—*Continued.*

PARTICULARS OF OPERATIONS PERFORMED DURING 1935.

	Anlaby Road		Beverley Road	
	Total	Died	Total	Died
No. of major operations	766	60	420	49
,, minor ,,	341	18	321	18
	1107	78	741	67

ULTRA VIOLET RAY TREATMENT.

	Beverley Road
Number of patients treated	142
Number of treatments given during the year	2668

Total lamp hours—			
No. 1	385 hours	25 mins.	
No. 2	342 ,,	0 ,,	
Sollux	174 ,,	0 ,,	
Alpine Sun	345 ,,	9 ,,	1246 hours 34 mins.

X-RAYS—TABLE SHOWING TYPES OF FILMS TAKEN.

	Anlaby Road	Beverley Road
Barium Meals	154	108
Chests	440	293
Bone	400	508
Others	190	172
	1184	1081

RADIUM TREATMENT.

	Anlaby Road
Number of patients treated with Radium	80
Number of treatments	120
Interstitial radiation (Needles and Tubes) milligramme hours	355,789
Surface radiation (Columbia paste and dental plates) milligramme hours	25,096

CLASSIFICATION OF CASES TREATED WITH RADIUM.

	Anlaby Road
Carcinoma of Breast	14
,, Mouth and Pharynx	4
,, Tongue	2
,, Cervix and Uterus	30
Rodent Ulcer	11
Others	19
	80

APPENDIX 10—*Continued.*

INSTITUTION HOSPITALS—*Continued.*

Pathology.

Anlaby Road.		Beverley Road.	
asserman reactions	201	Specimens	807
er specimens	615	Post Mortems (Coroners)	20
st Mortems (Coroners)	14	,, (Others)	92
,, (Others)	54	Inquests	23
uests	13		

Massage Treatment.

Anlaby Road.		Beverley Road.	
mber of patients treated	99	Number of patients treated	94
mber of Treatments—		Number of treatments	1620
(*a*) Massage	800		
(*b*) Electrical	599		

Beverley Road Institution Hospital—Venereal Disease.

	Men	Women	Total
ections of Novarsenobillon, etc.	308	258	566
er injections	292	183	475
	600	441	1041

sserman Reactions and other specimens 676

ntal Treatment.	Anlaby Road	Beverley Road
mber of patients treated by Dentist	90	143

APPENDIX 10—*Continued.*

INSTITUTION HOSPITALS—*Continued.*

CLASSIFICATION OF IN-PATIENTS WHO WERE DISCHARGED FROM OR WHO DIED IN THE INSTITUTIONS DURING THE PERIOD 1ST JANUARY TO 31ST DECEMBER, 1935.

Disease Group.	*Anlaby Road.* Children under 16	*Anlaby Road.* Men and Women	*Beverley Road.* Children under 16	*Beverley Road.* Men and Women
Acute Infectious Disease	188	19	180	58
Influenza	0	6	4	14
Tuberculosis—Pulmonary	9	177	4	45
Non-pulmonary	9	13	38	35
Malignant disease	1	237	0	98
Rheumatism—				
(1) Acute Rheumatism (Rheumatic Fever) together with sub-acute Rheumatism and Chorea	27	19	19	25
(2) Non-articular manifestations of so-called Rheumatism (Muscular Rheumatism Fibrositis, Lumbago and Sciatica)	0	38	2	11
(3) Chronic Arthritis	0	22	0	12
Venereal disease	2	11	10	150
Puerperal Pyrexia	0	2	0	0
Puerperal Fever	0	0	0	0
Other Diseases and Accidents connected with Child Bearing	0	48	0	113
Mental disease	4	73	9	244
Senile Decay	0	0	0	247
Violence	38	223	40	176
Diseases of the Nervous System and Sense Organs	31	176	10	204
,, ,, Respiratory System	187	326	248	207
,, ,, Circulatory System	6	452	26	190
,, ,, Digestive System	123	488	96	230
,, ,, Genito Urinary System	12	253	8	134
,, ,, Skin	94	123	101	71
Other Diseases	36	90	188	538
	767	2796	983	2802

APPENDIX 11.

SUMMARY OF INSPECTIONS, etc., MADE BY THE DISTRICT AND ASSISTANT SANITARY INSPECTORS AND OF NOTICES SERVED AND WORK DONE AS A RESULT THEREOF.

	1935.	1934.
Complaints registered	2575	2430
Inspections of—		
Passages, areas, etc.	6336	5855
Houses, etc.	9285	9743
Milk shops	3268	3159
Manure yards	1035	1285
Ice cream manufactories	821	909
Drainage and other works in progress	496	389
Miscellaneous	5194	2804
Smoke observations	4	5
Re-visits, etc. (1) Houses	10762	11289
(2) General	4932	4085
Result of Inspections—		
Notices served—Informal	8526	8130
Statutory	1261	954
Follow-up letters	2394	2346
Notices complied with—Informal	8538	7819
Statutory	1196	942
Notices not complied with—Informal	1491	1662
Statutory	512	447
Owners interviewed	1838	2087
Sanitary defects remedied—		
No. of houses involved	3850	3654
Drains, gullies and W.C's cleansed	1171	1094
Premises cleansed and limewashed	15	59
Areas and passages cleansed	148	106
Do. paved or repaired (informally)	263	260
Sanitary conveniences repaired or amended	592	554
Dust-bins provided	3741	4242
Drainage systems (separate or combined) reconstructed	13	13
Houses involved	21	22
Drainage systems (separate or combined) repaired (including gullies placed on existing drains)	6	16
Houses involved	19	23
Fall spouts disconnected from drains	8	23
Milk shops (adversely reported on)	1	2
Ice Cream premises (do.)	17	10
Housing Acts 1925 *and* 1930.		
Houses inspected	719	864
No. found not to be in all respects reasonably fit for human habitation	580	663
No. found to be totally unfit for human habitation	4	8
No. of notices served	652	758
No. of notices complied with	734	817
Re-visits	3689	2603
*Infectious Diseases**		
Cases investigated	4059	3894
Extra visits S.P. contacts, etc.	465	323

* Information recorded separately.

Detailed information with regard to statutory Notices served under the Public Health .ct, 1875, etc., is to be found on page 39.

F. C. MARCHANT, M.R.San.I., M.S.I.A.

APPENDIX 12.

HOUSES-LET-IN-LODGINGS.

The number of houses on the register at the end of the year was 450.

Number of Houses on Register at end of 1934		407
Do. registered during 1935		97
		504
Number of Houses taken off Register during 1935 for various reasons		54
Total number of Houses occupied as Houses-let-in-Lodgings at the end of 1935		450
Total number of rooms in the 450 houses		3602
Registered number of rooms in the 450 houses		2387
Number of rooms used for sleeping purposes only :—		
Unfurnished	378	
Furnished	260	
		638
Number of rooms used for living and sleeping purposes :—		
Unfurnished	812	
Furnished	937	
		1749
		2387

Number of persons accommodation provided for	Adults	4593
	Children	5268
Do. found in occupation	Adults	3168
	Children	1193
Number of families do.		1666

Number of Registration Certificates issued to Occupiers showing the number of persons allowed to occupy the rooms	97
Number of informal circulars issued to Occupiers requiring particulars as to lodgers	72
Number of copies of Bye-laws issued to Occupiers	72
New Registrations	97

Inspections.

Number of day visits to Houses-let-in-Lodgings	3694
Do. night do. do.	132
Do. day visits do. exempt from registration	1100
Total number of Inspections	4926

Particulars of Night Inspections :—

No. of houses visited			132
Aggregate No. of rooms			711
Do. Lodgers provided for			1989
Do. Persons found occupying such rooms—			
	Males.	*Females.*	
Over 10 years of age	521	562	
Under 10 years of age	241	258	
			1582

APPENDIX 12—*Continued*

umber of notices issued :—

Notices outstanding at end of 1934			167
Re Contravention of Bye-laws, etc.	Informal	313	
	Formal	1	
			314
Re Cleansing and Limewashing	Informal	355	
	Formal	67	
			422
	Total		933

otices complied with			860
,, outstanding at the end of 1935	Informal	73	
	Formal	—	
			73
umber of verbal cautions given			75
Do. follow up letters sent			90

ummary of defects, etc., remedied.

vercrowding of rooms discontinued	10
rovision for the separation of the sexes	4
ellar dwellings closed	—
remises cleansed and limewashed	355
ew water-closets provided	13
ew drainage	—
o. pavement	10
o. dustbins	65
hoked water-closets cleansed	8
hoked drains and gullies cleansed	26
oul water-closet basins cleansed	12
ater-closet cisterns repaired	14
aste and water pipes repaired	10
pouting repaired	32
rivies and water-closets repaired	24
ard pavement repaired	7
oofs and ceilings repaired	94
alls and floors repaired	101
ash cords repaired	129
nwholesome animals removed	3
ccumulations of refuse removed	6
iquid and solid refuse removed from rooms	11
loors of rooms, staircases, etc., cleansed	31
avement of yards, etc., cleansed	13
taircases repaired	11
ireplaces repaired	36
oors repaired	32
ater-closet seats and floors cleansed	10
indows provided or repaired	109
Total	1176

APPENDIX 13.

FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES AND HOMEWORK.

1.—INSPECTION.

PREMISES.	NUMBER OF		
	Inspections.	Written Notices.	Prosecutions.
Factories (including Factory Laundries)	111	14	—
Workshops (including Workshop Laundries)	1741	15	—
Workplaces (other than Outworkers' premises)	56	—	—
Totals	1908	29	—

The above figures include 37 inspections of Fire Escapes in Factories, and 32 of Fire Escapes in Workshops. The number of re-visits to Factories, Workshops and Workplaces was 496.

Visits to Bakehouses are included in this Table.

APPENDIX 13 —*Continued.*

2.—DEFECTS FOUND

PARTICULARS.	NUMBER OF DEFECTS.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
Nuisances under the Public Health Acts :—				
Want of cleanliness	2	3	—	—
Want of ventilation	5	2	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other nuisances	15	14	—	—
Sanitary accommodation { insufficient	3	3	—	—
Sanitary accommodation { unsuitable or defective	1	11	—	—
Sanitary accommodation { not separate for sexes	7	4	—	—
Public Health Acts Amendment Act, 1890, in force.				
Offences under the Factory and Workshop Act :—				
Illegal occupation of underground bakehouse (S. 101)	—	—	—	—
Other offences (excluding offences relating to outwork which are included in Part 3 of this Report)	28	24	—	—
Totals	61	61	—	—

APPENDIX 13—*Continued.*

3.—Home Work.

NATURE OF WORK.*	OUTWORKERS' LISTS, SECTION 107.												Outwork in unwholesome premises, Section 108.			Outwork in Infected premises, Sections 109 & 110.		
	Lists received from Employer.						Addresses of Outwrkrs.		Notices served on Occupiers as to keeping or sending Lists.	Prosecutions.		Inspections of Out-workers' premises.	Instances	Notices Served.	Prosecutions.	Instances.	Orders made (S. 110).	Prosecutions (Sections 109, 110)
	Twice in the Year.			Once in the Year.			Received from other Councils.	Forwarded to other Councils.		Failing to keep or permit inspection of lists.	Failing to send lists.							
	Lists.†	Outworkers.† Contractors.	Outworkers.† Workmen.	Lists.	Outworkers. Contractors.	Outworkers. Workmen.												
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
Making, cleaning, repairing, &c., wearing apparel ...	162	7	410	3	—	1	—	16	200	—	—	91	—	—	—	—	—	—
Making, repairing, &c., table linen, bed linen, &c.	2	—	10*a*	—	—	—	—	2	2	—	—	—	—	—	—	—	—	—
Lace, lace curtains and nets	—	—	2*b*	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Artificial flowers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Nets, other than wire nets...	6	—	222	—	—	—	—	—	9	—	—	—	—	—	—	—	—	—
Tents	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Sacks	—	—	—	2	—	5	—	1	2	—	—	—	—	—	—	—	—	—
Furniture and Upholstery	12	—	37*c*	—	—	—	—	2	11	—	—	5	—	—	—	—	—	—
Fur Pulling	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Feather sorting	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Umbrellas, &c.	2	—	4*d*		—	—	—	—	2	—	—	—	—	—	—	—	—	—
Carding, &c., of buttons, &c.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paper Bags	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Boxes made of paper, card-board chip or similar material	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Basket Making	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Brush Making	—	—	2*e*	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Racquet and Tennis Balls	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Stuffed Toys	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
File Making	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Electro-Plate	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cables and Chains	—	—	1*f*	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Anchors and Grapnels ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cart gear	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Locks, latches and keys ...	2	—	6*g*	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—
Pea Picking	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Curtains and Furniture Hangings	—	—	2*h*	—	—	—		—	—	—	—	—	—	—	—	—	—	—
Totals ..	186	7	696	5		9		21	231	—	—	96	—	—	—	—	—	—

* In those cases where an occupier has given out work of more than one of the classes specified in column 1 and has shown the number of workers in each class of work, the list has been included against the principal class only, but the workers have been assigned in column 1 to their respective classes.

† The figures required in columns 2, 3 and 4 are the *total* number of lists (received from employers who sent them both in February and August as required by the Act) and of the entries of names of outworkers in those lists. They will, therefore, usually be double of the number of such employers and (approximately) double of the number of individual outworkers whose names are given, since in the February and August lists of the same employer the same outworker's name will often be repeated.

a Two Outworkers included in lists of other class of work.
b Two Outworkers do
c Five Outworkers do
d Two Outworkers do
e Two Outworkers do
f One Outworker do.
g Two Outworkers do.
h Two Outworkers do.

APPENDIX 13—*Continued.*

4.—REGISTERED WORKSHOPS.

Class.	Number.
rkshops on the Register (S. 131) at the end of the year :—	
Bags, Baskets, &c.	12
Clothing, Boots, &c.	318
Coaches, Cycles, Harness, &c.	77
Coopers, &c.	17
Fish Curers	40
Food, Drink, &c. (Bakers, Confectioners, &c.)	310*
Furniture, Pianos, Brushes, &c.	80
Joiners, Plumbers, &c.	113
Laundries, Cleaners, &c.	25
Iron, Tin, Wire, &c.	35
Ships, Boats, Ropes, Sails and Nets	28
Watches, Jewellery, &c.	19
Sundry other Trades	160
Total number of Workshops on Register ...	1234

Including 72 Factory Bakehouses.

5.—OTHER MATTERS.

Class.		Number.
ters notified to H.M. Inspectors of Factories :—		
Failure to affix Abstract of the Factory and Workshop Act (S. 133) (including new Workshops in which protected persons were found employed, and Domestic Workshops)		42
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (S. 5)	Reports (of action taken) sent to H.M. Inspector	9
Other		3
derground Bakehouses (S. 101) :—		
Certificates granted during the year		—
In use at the end of the year		—

APPENDIX 13—*Continued.*

COMPLAINTS RECEIVED FROM H.M. INSPECTOR OF FACTORIES.

NATURE OF COMPLAINT.	No. of complaints received.	No. of complaints dealt with.	No. of complaints received, being dealt with.	No. of outstanding complaints dealt with.	REMARKS.
Insufficient sanitary accommodation	3	2	1	—	
Insufficient means of escape in case of fire	4	3*	1	—	* 1 Not upheld.
Sanitary conveniences not screened	1	1*	—	—	* Not upheld.
Sundry Nuisance	1	1	—	—	Nuisance abated before inspection was made.
Totals	9	7	2	—	

APPENDIX 13 (*Continued*).

WORKSHOPS AND WORKPLACES.

Table showing the trades, number of workshops and workplaces at present on the gister, and number of each sex employed when first inspected.

TRADES.	No. of Work-shops.	Persons Employed.		TRADES.	No. of Work-shops.	Persons Employed.	
		Males.	Females			Males.	Females
Workshops—							
rt Needle Workers	5	—	13	Rope Walks	4	16	—
Bag Repairers	7	7	71	Saddlers	3	11	—
Bakers*	287	478	380	Sailmakers	3	11	—
Basket Makers	5	14	—	Ship Riggers	8	46	—
Boat Builders	2	6	—	Slippermakers	1	2	—
Boot Repairers	54	102	—	Smiths	17	39	—
Bottlers of Beer, &c.	5	7	3	Stoneworkers	8	23	—
Brush Makers	2	6	—	Tailors	135	209	307
abinet Makers	10	44	—	Tinsmiths	17	57	—
hair Makers	1	8	—	Upholsterers	30	96	29
oach Builders	6	20	—	Venetian Blind Makers	2	3	2
onfectioners	10	11	18	Watch and Clock Makers	19	32	—
oopers	12	31	—	Weighing Mach'e Makers	8	25	—
ycle and Motor Repairers	63	154	1	Wheelwrights	2	5	—
Dressmakers	82	10	536	Wireworkers	1	2	—
Egg Sorters	7	21	49	Wood Carvers	3	6	—
Firewood Cutters	1	3	—	Sundry Trades	143	638	230
Fish Curers	40	266	388				
Fish Kit Makers	5	25	—	Totals	1234	2970	2521
Hosiery, &c., Knitters	3	—	6				
oiners	46	148	—	**Workplaces—**			
Lath Renders	1	9	—	Restaurant and Hotel Kitchens	101	79	415
Laundries, &c.	25	37	31	Sundry Workplaces	14	89	12
Leather Workers	3	10	19				
Maltsters	1	7	—	Totals	115	168	427
Marble Masons	2	3	—				
Milliners	38	—	179	Grand Totals—			
Netbraiders	11	37	250				
Painters	9	37	—	Workshops	1234	2970	2521
Piano Repairers	6	19	—	Workplaces	115	168	427
Picture Frame Makers	3	4	1				
Polishers	21	65	—		1349	3138	2948
Plumbers	49	166	—				
Rag Sorters	8	14	8				

---

* Including 72 Factory Bakehouses.

APPENDIX 14.

ADMINISTRATION OF THE SHOPS ACTS, 1912–1934.

	1933.	1934	1935.*
Shops on Register	7473	7524	7614
Inspections	15721†	15477†	1438
Re-Visits	—	—	1013
Inspections by Sanitary Inspectors	—		19
Re-visits by Sanitary Inspectors	—	—	13
Observations re Closing and Night Employment	—	—	15401
Excessive Hours of Employment of Young Persons	—		12
Assistants' Half Holidays	18	24	23
Open After Closing Hour	49	25	29
Mixed Shops Open After Closing Hour—Act not complied with	98	85	25
Trading Elsewhere than in a Shop	1	1	—
Night Employment	—	—	5
Mealtimes Not Allowed :			
Found	14	1	13
Remedied	—	—	10
Notices Not Exhibited :			
Found	345	346	1245
Remedied	—	—	934
Seats Required :			
Found	3	2	29
Remedied	4	2	27
Records Not Kept :			
Found	—	—	351
Remedied	—	—	254
Insufficient Lighting Arrangements :			
Found	—	—	6
Remedied	—	—	6
Washing Facilities Required :			
Found	—	—	60
Remedied	—	—	50
Facilities for Taking Meals Required :			
Found	—	—	82
Remedied	—		60

(*Continued.*)

APPENDIX 14—*Continued.*

ADMINISTRATION OF THE SHOPS ACTS, 1912-1934.

	1933.	1934.	1935
entilation:			
Found	—	—	1
Remedied	—	—	1
emperature:			
Found	—	—	2
Remedied	—	—	2
anitary Conveniences:			
Found	—	—	15
Remedied	—	—	13
ROSECUTIONS.			
No. of Cases	2	—	3
Convictions	2	—	3
Dismissed, withdrawn, or respited on payment of costs	—	—	—

* Includes contraventions under the Shops Act, 1934.

± Includes observations *re* Closing of Shops.

REGISTER OF SHOPS.

Shops exempted, by Orders made by the City Council, from the provisions as to Weekly Half-holiday :—

	No. of persons employed therein.	
No. of Shops.	*Males.*	*Females.*
334	168	167

Shops required, by Orders made by the City Council, to close for the Weekly Half-Holiday :—

	No. of persons employed therein.	
No. of Shops.	*Males.*	*Females.*
617*	879	109

*58 shops included in Exempted Trades.

Shops exempted by the Act, from the provisions as to Weekly Half-Holiday :—

	No. of persons employed therein.	
No. of Shops.	*Males.*	*Females*
3310	1393	2277

Shops required by the Act to close for the Weekly Half-Holiday :—

	No. of persons employed therein.	
No. of Shops.	*Males*	*Females.*
4604*	2896	2397

*1797 already included in Exempted Trades.

No new orders have been made under the Shops Acts ; a list of those in operation in the ity is given in the Report for 1925.

APPENDIX 15.

ANNUAL REPORT ON THE INSPECTION AND REGISTRATION OF CANAL BOATS FOR THE YEAR ENDED 31st DECEMBER, 1935.

Canal Boats inspected	736
Re-inspections	189
Total number of inspections	925
No. of Canal Boats found in good order	546
No. found contravening the Acts	190
	736

The 736 Canal Boats inspected during the year are registered to accommodate 3,139 adult persons, whilst only 1,276 adults (1160 males and 116 females) and 8 children were occupying the said boats.

The number of children of school age found on the boats registered by this Authority was 2. The female adults and children above referred to were found to be living on the boats chiefly during the school holiday periods.

Particulars of Contraventions.

		No. of defects.	*No. remedied.*
Boats not properly lettered and numbered		25	24
Absence of registration certificate		26	23
Requiring Repairs:—			
Decks, stoves and floors	13		
Watercasks, ventilators and deck lights	5		
Cupboards and bedberths	4		
		22	22
Certificates not identifying owner with boat		23	20
Certificates not having owners' correct address		39	39
Requiring renewal of paint		3	3
Cabins not in a cleanly condition		62	62
Unregistered boats		10	7
Bilge water not removed		2	2
Overcrowding		1	1
		213	197

With reference to the 16 contraventions not remedied, notices have been sent to the owners or verbal cautions given, and the cases will be followed up.

The 15 contraventions existing when the last Annual Report was presented have since been remedied.

In all cases where written notices or letters have been sent to the owners of boats contravening the Acts or Regulations, the masters of the boats have also been cautioned verbally.

Infectious Diseases.

No notifications were received from medical practitioners of any case of infectious disease having occurred on any boat in the district during the year.

APPENDIX 15 – *Continued.*

Legal Proceedings.

It has not been found necessary during the year to take legal proceedings, as in nearly very instance where contraventions of the Canal Boats Acts have occurred, the persons esponsible have had the defects remedied with the least possible delay.

Registration Department.

Total number of canal boats on the register on 31st December, 1934	900
Registered during the year	26
	926
Registrations cancelled during the year	5
Total number of boats on register on 31st December, 1935	921

Particulars of boats registered during the year :—

Boats not previously registered	2
Boats previously registered with other authorities	16
Boats previously registered only under the Merchant Shipping Acts	8
	26

Copy certificates issued in consequence of :—

Change of Ownership	9
Change of boat's name	5
Alteration of owner's address	14
Fore cabins deleted	2
Certificates lost or dilapidated	1
	31

ertificates endorsed in consequence of :—

Change of ownership . .	9
Alteration of owner's address ..	25
Fore cabins deleted .	4
Change of boat's name .	1
	39

Number of boats believed to be in use or available (A)	921
Number of steam propelled boats included in (A)	19
„ motor propelled boats do	20

CHARLES PARROTT BOOTH,
Inspector and Examining Officer

APPENDIX 16.

HOUSING STATISTICS.

Number of houses and flats erected during the year :—	
(*a*) Total (including numbers given separately under (*b*))	1,679
(*i*) By the local authority	268
(*ii*) By other local authorities	Nil
(*iii*) By other bodies and persons	1,411
(*b*) With State assistance under the Housing Acts :—	
(*i*) By Local Authority—	
(*a*) For the purpose of Part III of the Act of 1930	268
(*b*) For the purpose of Part III of the Act of 1925	Nil
(*c*) For the purpose of the Act of 1924	Nil
(*ii*) By other bodies or persons	Nil

1. INSPECTION OF DWELLING-HOUSES DURING THE YEAR :—

(1) (*a*) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	6,263
(*b*) Number of inspections made for the purpose	14,451
(2) (*a*) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	719
(*b*) Number of inspections made for the purpose	4,408
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	4
(4) Number of dwelling-houses (excluding those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	4,999

2. REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	4,584

3. ACTION UNDER STATUTORY POWERS DURING THE YEAR.

A.—Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(*a*) By owners	Nil
(*b*) By local authority in default of owners	Nil

B.—Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	553
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(*a*) By owners	494
(*b*) By local authority in default of owners	Nil

APPENDIX 16—*Continued.*

HOUSING STATISTICS—*Continued.*

C.—Proceedings under sections 19 and 21 of the Housing Act, 1930.

(1) Number of dwelling-houses in respect of which representations were made with a view to the making of Demolition Orders	94
(2) Number of dwelling-houses in respect of which Demolition Orders were made	86
(3) Number of dwelling-houses in respect of which undertakings under Section 19 (2) of the Housing Act, 1930, were given	9
(4) Number of dwelling-houses rendered fit in pursuance of undertakings under Section 19 (2) of the Housing Act, 1930	2
(5) Number of houses demolished in pursuance of Demolition Orders	108
(6) Number of houses demolished prior to the making of Demolition Orders	Nil.

D.—Proceedings under Section 20 of the Housing Act, 1930.

(1) Number of dwelling-houses in respect of which representations were made with a view to the making of Closing Orders	1
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were made	1
(3) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil

E.—Proceedings under Section 3 of the Housing Act, 1925.

(1) Number of dwelling-houses in respect of which notices became operative requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(*a*) By owners	Nil
(*b*) By local authority in default of Owners	Nil
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declaration by owners of intention to close	Nil.

F.—Proceedings under Section 5 of the Housing Act, 1930.

Number of houses demolished in pursuance of the :

Kingston upon Hull (Canning Street) Housing Confirmation Order, 1931	130
Kingston upon Hull (Sykes Street) Housing Confirmation Order No. 1, 1931	120
Kingston upon Hull (Sykes Street) Housing Confirmation Order No. 2, 1931	57
Kingston upon Hull (Aldbro Street) Housing Confirmation Order, 1931	40
Kingston upon Hull (Scott Street) Housing Confirmation Order, 1933	66
Kingston upon Hull (Hodgson Street) Housing Confirmation Order, 1933	17
Kingston upon Hull (Church Street) Drypool Housing Confirmation Order, 1934	162
Kingston upon Hull (Jenning Street) Housing Confirmation Order, 1934	166
Kingston upon Hull (Witham) Housing Confirmation Order, 1935	22
Kingston upon Hull (Jane Street) Housing Confirmation Order 1935	3
Kingston upon Hull (Edgar Street) Housing Confirmation Order, 1935	25

APPENDIX 17.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

Samples taken under the above Act and submitted to the Public Analyst for analysis.

Description of Sample.	No. of Samples.	Samples Taken.				Genuine.	Adulterated.	No action taken.	Letters of caution, &c.	Prosecutions.
		Formally.	Informally.	By agent.	In course of delivery, &c.					
Beers, Wines, Spirits, &c.										
Beer	9	—	9	8	—	9	—	—	—	—
Wines	7	—	7	1	—	6	1 (*a*)	—	—	—
Wines—Medicated	5	—	5	5	—	5	—	—	—	—
Spirits—Brandy	4	2	2	2	—	4	—	—	—	—
Gin	5	3	2	2	—	3	2 (*b*)	—	—	1
Rum	4	2	2	2	—	4	—	—	—	—
Whisky	4	2	2	2	—	4	—	—	—	—
Beverages.										
Aerated Waters	6	—	6	6	—	6	—	—	—	—
Cocoa	6	—	6	6	—	6	—	—	—	—
Coffee	10	1	9	10	—	8	2 (*c*)	—	—	1
Coffee and Chicory	6	—	6	6	—	6	—	—	—	—
Coffee and Chicory Extracts	6	—	6	6	—	6	—	—	—	—
Coffee Cubes	1	—	1	—	—	1	—	—	—	—
Cordials	2	—	2	2	—	2	—	—	—	—
Fruit Crystals	6	—	6	6	—	6	—	—	—	—
Squash, Lemon and Orange	5	—	5	4	—	4	1 (*d*)	—	—	—
Tea	6	—	6	6	—	6	—	—	—	—
Tea—Digestive	7	1	6	6	—	5	2 (*e*)	—	1	—
Wines—Non-Alcoholic	6	—	6	6	—	6	—	—	—	—
Cereals.										
Arrowroot	12	—	12	12	—	12	—	—	—	—
Breakfast Cereals	6	—	6	6	—	6	—	—	—	—
Flour	6	—	6	6	—	6	—	—	—	—
Ground Rice	6	—	6	6	—	6	—	—	—	—
Oatmeal	6	—	6	6	—	6	—	—	—	—
Pearl Barley	6	—	6	6	—	6	—	—	—	—
Rice	6	—	6	6	—	6	—	—	—	—
Tapioca	6	—	6	6	—	6	—	—	—	—
Confections.										
Biscuits	7	—	7	6	—	7	—	—	—	—
Chocolates	8	—	8	8	—	8	—	—	—	—
Sweets	24	—	24	20	—	24	—	—	—	—
Sweets—Medicated	2	—	2	—	—	2	—	—	—	—

APPENDIX 17—*Continued.*

DESCRIPTION OF SAMPLE.	No. of Samples.	SAMPLES TAKEN.				Genuine.	Adulterated.	No action taken.	Letters of caution, &c.	Prosecutions.
		Formally.	Informally.	By agent.	In course of delivery, &c.					
gs.										
lmond Oil	6	—	6	3	—	6	—		—	
mmoniated Tincture of Quinine	6	—	6	6	—	6	—		—	
amphorated Oil	6		6	6	—	6	—	—	—	
ompound Tincture of Rhubarb	6	—	6	6	—	5	1 (*f*)	—	1	
lycerine of Borax	7	1	6	6	—	5	2 (*g*)	—	1	
regory's Powder	6	—	6	6	—	5	1 (*j*)	—	1	
ime Water	6	—	6	6	—	5	1 (*h*)	—	1	—
ercury Ointment	6	—	6	6	—	4	2 (*i*)	—	2	—
aregoric	7	—	7	7	—	7	—	—	—	—
arrish's Food	6	—	6	5	—	6	—	—		—
owdered Ginger	6	—	6	6	—	6	—	—	—	
eidlitz Powders	6	—	6	6	—	6	—	—	—	—
artaric Acid	6	—	6	6	—	6	—	—	—	—
urpentine	6	—	6	6	—	6	—	—	—	—
inc Ointment	6		6	5	—	6	—	—	—	
s (Animal and Vegetable).										
ripping	3	—	3	3	—	3	—	—	—	
ripping (Pork)	2	—	2	2	—	—	2 (*k*)	—	2	—
ripping (Beef and Pork)	1	—	1	1	—	—	1 (*l*)	—	1	—
ard	8	1	7	7	—	6	2 (*m*)		—	1
ard Substitutes	11	—	11	9	—	11	—	—	—	—
argarine	15		15	15	—	15	—	—	—	—
uet (Shredded)	5	—	5	5	—	2	3 (*n*)	—	—	—
h, Meats, &c.										
acon	6	—	6	6	—	6	—	—	—	—
lack Puddings	5	—	5	5	—	5	—	—	—	
orned Beef	6	—	6	6	—	6	—	—	—	
ish Paste	6	—	6	6	—	6	—	—	—	
olony	6	—	6	6	—	6	—	—	—	
otted Meat	19	2	17	15	—	16	3 (*o*)	—	1	
almon Roll, etc.	5	1	4	4	—	4	1 (*p*)	—	1	
ausages (Beef)	14	—	14	14	—	14	—	—	—	
ausages (Pork)	6	6	—	—	—	6	—	—		
aveloys	6	—	6	6	—	6				
moked Fish	6	—	6	6	—	6				
ripe	6	—	6	6	—	6				

APPENDIX 17—*Continued.*

Description of Sample.	No. of Samples.	Samples Taken.				Genuine.	Adulterated.	No action taken.	Letters of caution, &c.	Prosecutions.
		Formally.	Informally.	By agent.	In course of delivery, &c.					
Milk and Milk Products.										
Butter	74	74	—	1	—	69	5 (*q*)	—	6	—
Cheese	10	—	10	8	—	10	—	—	—	—
Curd	5	—	5	—	—	5	—	—	—	—
Cream	8	—	8	3	—	8	—	—	—	—
Cream—Tinned	6	—	6	6	—	6	—	—	—	—
Milk	1262	1219	43	1	97	1187	75 (*r*)	1	40	9
Milk—Separated ...	12	12	—	—	—	11	1 (*s*)	—	1	—
Milk—Dried	4	—	4	4	—	4	—	—	—	—
Milk—Condensed ...	6	—	6	6	—	6	—	—	—	—
Milk—Evaporated ...	6	—	6	6	—	6		—	—	—
Preserves.										
Banana Cream ...	1	—	1	—	—	1	—	—	—	—
Candied Peel	6	—	6	6	—	6	—	—	—	—
Cheese—Lemon	2	—	2	2	—	2	—	—	—	—
Curd—Lemon ...	10	—	10	9	—	9	1 (*t*)	—	1	—
Currants	6	—	6	6	—	6	—	—	—	—
Fruits—Bottled	6	—	6	6	—	6	—	—	—	—
Fruits—Dried ...	6	—	6	6	—	6	—	—	—	—
Fruits—Tinned ...	6	—	6	6	—	6	—	—	—	—
Jam	15	1	14	14	—	13	2 (*u*)	—	2	—
Marmalade	1	—	1	1	—	1	—	—	—	—
Mincemeat	6	—	6	6	—	6	—	—	—	—
Raisins	6	—	6	6	—	6	—	—	—	—
Seasonings, etc. ...										
Carraway—Powdered	3	—	3	3	—	3	—	—	—	—
Food Colourings ..	3	—	3	3	—	3	—	—	—	—
Flavouring Essences	4	—	4	4	—	4	—	—	—	—
Herbs—Dried ...	11	—	11	11	—	11	—	—	—	—
Ground Ginger ..	6	—	6	6	—	6	—	—	—	—
Pepper—White ...	7	1	6	6	—	5	2 (*w*)	—	2	—
Sauces	6	—	6	6	—	6	—	—	—	—
Spices	6	—	6	6	—	6	—	—	—	—
Vinegar—Malt ...	8	1	7	6	—	7	1 (*v*)	—	—	—
Vegetables.										
Lentils	7	—	7	7	—	7	—	—	—	—
Peas—Dried	6	—	6	6	—	6	—	—	—	—
Peas—Split	5	—	5	5	—	5	—	—	—	—
Peas—Tinned	6	—	6	6	—	6	—	—	—	—
Miscellaneous.										
Almonds—Ground .	12	—	12	12	—	12	—	—	—	—
Baking Powder ..	6	—	6	6	—	6	—	—	—	—

APPENDIX 17—*Continued.*

DESCRIPTION OF SAMPLE.	No. of Samples.	SAMPLES TAKEN. Formally.	Informally.	By Agent.	In course of delivery, &c.	Genuine.	Adulterated.	No. Action taken.	Letters of Caution, &c.	Prosecutions.
scellaneous (cont.)										
Blanc Mange Powder	7	—	7	7	—	7	—	—	—	—
Bread and Butter ..	6	6	—	—	—	5	1	—	—	1
ake and Pudding Mixtures ..	6	—	6	6	—	6	—	—	—	—
ustard Powders	6	—	6	6	—	6	—	—	—	—
Honey ..	5	—	5	5	—	5	—	—	—	—
ellies ..	6	—	6	—	—	6	—	—	—	—
Pickles ..	6	—	6	6	—	5	1 (*x*)	—	2	—
Soups—Desiccated	4	—	4	4	—	4	—	—	—	—
Sugar—Brown	12	—	12	12	—	12	—	—	—	—
Sugar—Icing ..	7	—	7	7	—	7	—	—	—	—
Sugar—White	12	—	12	12	—	12	—	—	—	—
Syrup ..	4	—	4	4	—	4	—	—	—	—
Treacle	2	—	2	2	—	2	—	—	—	—
Yeast ..	6	—	6	6	—	6	—	—	—	—
Totals....	2077	1295	782	652	98	1961	116	—	65	13

An informal sample which contained 68 parts sulphur dioxide per million parts, although the label on the bottle stated that no preservatives were present. A "repeat" sample showed that the offending part of the label had been covered by an adhesive slip.

Includes an informal sample which contained not less than 29 per cent. excess water. Proceedings were instituted with respect to the formal repeat sample.

Includes an informal sample containing about 40 per cent. chicory. Proceedings were instituted in respect of the formal "repeat" sample.

An informal sample which contained both sulphur dioxide and benzoic acid, although both preservatives are not allowed together in such beverages. The repeat formal sample was genuine.

Includes an informal sample which contained a normal amount (13 per cent.) of tannin for Indian and Ceylon teas. The description "Digestive Tea" was therefore misleading. The formal "repeat" sample showed the presence of 14 per cent. of tannin.

An informal sample deficient in alcohol to the extent of 7·0 per cent.

An informal sample which contained only 0·10 per cent. of borax instead of 12·0 per cent. as required by the British Pharmacopœia, and the formal "repeat" sample which was 50 per cent. deficient in borax.

An informal sample deficient in caustic lime to the extent of 46·6 per cent.

(*Continued.*)

APPENDIX 17—*Continued.*

(*i*) Informal samples which contained only 12 and 15 per cent. respectively of mercury instead of 30 per cent. required by the British Pharmacopœia.

(*j*) An informal sample prepared with magnesium oxide (magnesia) instead of the magnesium carbonate of the British Pharmacopœia.

(*k*) Two informal samples which contained respectively 51 per cent. of water and less than 45 per cent. fat, and 34 per cent. water and less than 64 per cent. fat.

(*l*) An informal sample which contained nearly 6 per cent. of water and about 93 per cent fat.

(*m*) Includes an informal sample which consisted of vegetable fat. Proceedings were instituted in respect of the formal " repeat " sample.

(*n*) Three informal samples, two containing dry rice flour to the extent of 7·0 per cent. and 8 per cent. respectively, and one containing dry wheat flour 10·5 per cent. and moisture 7 per cent. The samples are being followed up.

(*o*) Three informal samples, which as they contained appreciable amounts of farinaceous material, and, in one case, water in excess, were not of the Corporation's standard. Two of the samples were repeated formally and found genuine, whilst a letter of caution was sent to the vendor of the remaining sample.

(*p*) An informal sample which contained 14·7 per cent. dry wheat flour and 52·5 per cent. water, thus contravening the Corporation's standard.

(*q*) Formal samples containing water in excess in amounts varying between 0·3 and 1·8 per cent. Six letters of caution were sent to four retailers, one manufacturer, and a wholesaler.

(*r*) Includes 48 formal and informal samples deficient in milk-fat and or adulterated with added water, regarding which 38 letters of caution were sent to the producers or vendors ; three formal samples deficient in milk-fat (pursued by "Appeal to Cow" samples which proved to be of similar composition), in respect of which two letters were sent to the producers ; two informal and two formal samples deficient in milk-fat or containing added water, repeated formally and found genuine ; three informal samples containing added water, followed up by formal samples in respect of which proceedings were instituted ; and one formal sample deficient in milk-fat, concerning which no action was taken, as the sample formed part of a consignment, the average fat-content of which was above the standard set by the Sale of Milk Regulations, 1901.

(*s*) A formal sample which contained 5·8 per cent. added water.

(*t*) An informal sample labelled " Home Made Lemon Curd," which was found to contain a farinaceous ingredient, a coal-tar dye, and only small amounts of fat and protein. The label was regarded as unsatisfactory, and has since been amended.

(*u*) One informal sample and the formal " repeat " sample which contained sulphur dioxide in excess to the extent of 42 and 19 parts respectively per million parts.

(*v*) An informal sample containing at least 50 per cent. of vinegar other than malt vinegar, which was repeated formally and proved genuine.

(*w*) An informal sample and the formal " repeat " sample which contained sulphur dioxide (anhydrous) to the extent of 46 and 40 parts respectively per million parts.

(*x*) An informal sample containing 26 parts of sulphur dioxide per million parts of the sample. Letters of caution were sent to the retailer and the manufacturers.

APPENDIX 18.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

The results of the 20 cases in which legal proceedings were instituted are as follow :—

o. of mple.	Nature of Sample.	Particulars of Adulteration.	Result of Proceedings.
1390	Milk	Adulterated with at least 3·0 per cent. of added water.	One summons issued on the average adulteration of these three samples. Summons dismissed on payment of £1 1s. 0d. costs.
1391	Do.	do. at least 1·7 per cent.	
1392	Do.	do. at least 8·7 per cent.	
ull 1	Do.	do. at least 3·4 per cent.	One summons issued on the average adulteration of these three samples. Summons dismissed on payment of £1 1s. 0d. costs.
ull 2	Do.	do. at least 10·4 per cent.	
ull 3	Do.	do. at least 10·4 per cent.	
1535	Do.	do. at least 39·6 per cent.	One summons issued on the average adulteration of these two samples. Fined £20 0s. 0d. and £1 16s. 4d. costs.
1536	Do.	do. at least 29·0 per cent., and in addition, deficient in milk-fat to the extent of 4·3 per cent.	
ull 7	Do.	Adulterated with at least 28·5 per cent. of added water.	One summons issued on the average adulteration of these two samples. Fined £20 0s. 0d.
ull 8	Do.	do. at least 19·2 per cent.	
1991	Do.	do. at least 38·3 per cent.	One summons issued on the average adulteration. Fined £2 0s. 0d. or 27 days.
1992	Do.	do. at least 1·7 per cent.	
E.R. ull 3	Do.	do. at least 35·8 per cent.	Fined £2 0s. 0d. and £2 8s. 2d. costs or 30 days.
1230	Do.	do. at least 2·8 per cent.	Fined £2 2s. 0d.

(Continued.)

APPENDIX 18—*Continued.*

No. of Sample.	Nature of Sample.	Particulars of Adulteration.	Result of Proceedings.
1259	Milk	Deficient in milk-fat to the extent of 13·3 per cent.	Fined £3 3s. 0d.
1413	Do.	do. 34·0 per cent.	Summons dismissed on payment of £1 1s. 0d. costs.
533	Coffee	Adulterated with 40 per cent. of Chicory	Summons dismissed on payment of £1 1s. 0d. costs.
668	Gin	Contained water in excess to the extent of 27·2 per cent.	Fined £1 1s. 0d. and £2 2s. 0d. costs.
1398	Lard	Consisted of vegetable fat, 100 per cent.	Fined £1 0s. 0d.
978	Bread and Butter	The fat on the bread consisted of vegetable fat (Margarine) not less than 20 per cent.	Fined 10s. 0d. and 2s. 6d. costs.

APPENDIX 19.

PUBLIC HEALTH (PRESERVATIVES, Etc. IN FOOD) REGULATIONS.

o. of mple	Nature of Sample.	Preservative Allowed.	Particulars of Contravention of Regulations.	Action Taken.
65	Jam.	40 parts sulphur dioxide per million parts.	Contained sulphur dioxide in excess to the extent of 42 parts per million parts of the sample.	Repeated formally. See No. 86 below.
86	Do.	Do.	Do. to the extent of 19 parts.	Letters of caution to retailer and wholesaler.
78	Pickled Onions.	250 parts benzoic acid per million parts.	Contained sulphur dioxide to the extent of 26 parts per million parts of the sample.	Letters of caution to retailer and manufacturer.
266	Lemon Squash.	Either sulphur dioxide 350 parts or benzoic acid 600 parts per million parts.	Contained sulphur dioxide to the extent of 253 parts per million parts, and benzoic acid to the extent of 125 parts per million parts of the sample.	Repeated formally and found genuine.
02	White Pepper.	None.	Contained sulphur dioxide (Anhydrous) to the extent of 46 parts per million parts of the sample.	Repeated formally. See No. 461 below.
61	Do.	Do.	Do. to the extent of 40 parts.	Letters of caution to retailer and wholesalers.
84	Tent Wine.	450 parts sulphur dioxide per million parts.	Contained sulphur dioxide to the extent of 68 parts per million parts of the sample. The label on the bottle bore the words "Contains no preservative."	Repeat sample obtained when it was found that the offending words had been deleted from the label.

(Continued.)

APPENDIX 19—*Continued.*

No. of Sample.	Nature of Sample.	Preservative Allowed.	Particulars of Contravention of Regulations.	Action Taken.
851	Beef Sausages	450 parts sulphur dioxide per million parts.	Contained sulphur dioxide to the extent of 210 parts per million parts of the sample. The sample was duly labelled "These sausages contain preservative," but the words were printed in type of only 7/64ths inch in height instead of $\frac{1}{8}$th inch.	Letter of caution to vendors.
1421	Pork Sausages.	Do.	Contained sulphur dioxide to the extent of 162 parts per million parts of the sample. The sample was duly labelled "These sausages contain preservative," but the words were printed in type of only 1/10th inch instead of $\frac{1}{8}$th inch.	Proceedings instituted. Fined £5 0s. 0d.

APPENDIX 20.

REPORT OF CHIEF FOOD AND VETERINARY INSPECTOR.

Summary of Animals Affected with Tuberculosis.

Carcases Unsound.

	1932	1933	1934	1935
ows	47	73	95	105
eifers	7	11	8	11
ulls	—	1		3
xen	13	9	9	18
gs	64	51	103	102
lves	7	17	16	22
	138	162	231	261

Carcases found to be Unsound from causes other than Tuberculosis.

Beef.		Mutton.		Veal.		Pork.	
Disease or Condition.	No.	Disease or Condition.	No.	Disease or Condition.	No.	Disease or Condition.	No.
ropsy	7	Asphyxia	1	Decomposing	2	Decomposing	10
yrexia	14	Emaciation	42	Dropsy	1	Dropsy	20
eptic Metritis	3	Pleurisy	1	Pyæmia	5	Enteritis	4
maciation	1	Pyrexia	5	Pyrexia	22	Peritonitis	4
raumatism	3¼	Decomposing	3	Immaturity	6	Pyrexia	9
neumonia	1	Dropsy	16	Rheumatoid Arthritis	1	Rickets	11
ohne's Disease	1	Parturient Fever	18	Septicæmia	5	Swine Erysipelas	26
heumatoid Arthritis	¼	Septicæmia	1	Moribund	2	Traumatism	2
oribund	1	Traumatism	1	Traumatism	2	Septicaemia	2
næmia	1	Caseous-Lymphadenitis	1			Emaciation	2
		Moribund	8			Gangrenous	2
		Rickets	2			Jaundice	6
		Pyæmia	1			Pleurisy	5
		Rheumatoid Arthritis	1			Moribund	3
						Pyæmia	1
Totals	32½		101		46		107

APPENDIX 20—*Continued.*

PARTICULARS OF FRUIT AND VEGETABLES SORTED UNDER SUPERVISION.

Description.	*Sorted.*	*Unsound.*
Apples	15 packages	5 packages.
Oranges	169 ,,	4 ,,
Pears	15 ,,	7 ,,
Tomatoes	64 ,,	33 ,,

OTHER FOODSTUFFS AND VEGETABLES FOUND TO BE UNFIT, WITHOUT SORTING.

Apples	78 Packages.
Apricots	16 ,,
Bananas	9 ,,
Blackcurrants	14 ,,
Cabbages	77 ,,
Chestnuts	17 ,,
Figs	21 ,,
Gooseberries	23 ,,
Grapes	47 ,,
Kidney Beans	8 ,,
Lettuce	106 ,,
Leeks	9 ,,
Marrows	324 ,,
Mushrooms	8 ,,
Oranges	5 ,,
Parsnips	6 ,,
Pears	68 ,,
Pineapples	1 ,,
Plums	64 ,,
Potatoes	3 ,,
Radishes	6 ,,
Raspberries	26 ,,
Rhubarb	4 ,,
Sprouts	16 ,,
Tomatoes	106 ,,

In addition to the above, the following seizures of miscellaneous foodstuffs were made :—

Chocolates	6 cwts.
Crabs	1730
Eggs	300
Maws	1 package
Mussels	16 packages
Prawns	199 ,,
Rabbits	72
Shrimps	1 package
Tinned Goods	31958 tins

APPENDIX 20—*Continued.*

SUMMARY OF INSPECTIONS OF PREMISES, ETC.

Slaughterhouses, Butchers' Shops, Factories and Stalls	16,764
Fish Shops and Stalls, Game Stores, Curing Houses and Carts	1,232
Fruit Warehouses, Shops, Markets, Stalls and Carts....	6,590
Cowsheds and Dairies	349
	24,935

VETERINARY REPORT.

Performing Animals (Regulation) Act, 1925. One hundred and ninety animals affected this Act came into the City during the year. The performances were witnessed and were tisfactory. The licences were found to be in order.

Parasitic Mange. One case occurred, which was reported to the Inspector under the ontagious Diseases of Animals Acts.

Rabies. Foot and Mouth Disease. Glanders. Sheep Scab. No cases occurred or were ported in the City during the year.

Swine Fever. One case of Swine Fever was found by the Department in a City slaughter-ouse.

Anthrax. There was one confirmed case of anthrax during the year.

Proceedings were taken against a butcher for not notifying a case of suspected anthrax. he defendant was fined £1 and costs.

Other Contagious Diseases. No cases of any disease specified by the Contagious iseases (Animals) Acts, other than those already referred to, occurred in the City during 1935.

Veterinary Supervision of Horses. The Veterinary Inspector paid visits to the various orporation Stables in the City, which accommodated 56 horses, viz. :—

Police	4
Public Cleansing Department	45
Parks	2
Sanatorium	2
Public Assistance	3

The horses of the Public Cleansing Department received treatment on 60 occasions uring the year, and the drugs required were dispensed within the Department.

Five cows were subjected to, and passed, the Tuberculin Test before being purchased the Mental Hospital Committee.

Numerous visits were also paid to the Mental Hospital Farms at Willerby, Winestead, nd at the Sanatorium, Cottingham, by the Veterinary Inspector to treat the stock.

A monthly veterinary examination and semi-annual tuberculin tests of the herd of ows at the Mental Hospital, and periodical inspections of the stock at Winestead Farm have een made.

Occasional visits were paid to Low Bransholme Farm for inspection and treatment of he stock.

APPENDIX 20—*Continued.*

Cruelty to Animals Acts. For the purposes of these Acts, the Veterinary Inspector examined 3 animals at the request of the police. Two prosecutions were instituted, and convictions were obtained ; the fines totalled £4 and costs.

Horse Purchase Committee. Visits were made by the Veterinary Inspector with members of the Committee to examine horses for soundness before being purchased.

Fat Stock Market. A weekly market is held on Mondays at which fat cattle, sheep and pigs are exposed for sale. Inspections of the stock are made on each market day for the purposes of the Public Health Act, 1875, and the Contagious Diseases (Animals) Acts. The appproximate numbers of animals sold in the past two years have been :—

	1934.	1935.
Cattle	24,239	24,183
Sheep and Lambs	98,834	88,581
Pigs	52,556	63,439

There is also an adjoining market for store stock, where young animals are offered for sale each market day. Animals in this market and the Hull Horse Market are also inspected for the purposes of the Contagious Diseases (Animals) Acts.

H. P. LEWIS, M.R.C.V.S.,
Chief Food Inspector.

APPENDIX 21.

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1935.

Disease.	At All Ages.	Number of Cases Notified. At Ages—Years.												Total Cases Notified in Each Locality.																					Total No. of City Cases removed to Infectious Diseases Hospital.	Total No. of Deaths in the City.
		Under 1 year.	1 year and under 2 years.	2 years and under 3 years.	3 years and under 4 years.	4 years and under 5 years.	5 years and under 10 years.	10 years and under 15 years.	15 years and under 20 years.	20 years and under 35 years.	35 years and under 45 years.	45 years and under 65 years.	65 years and upwards.	Albert.	Alexandra.	Beverley.	Botanic.	Coltman.	Drypool.	East Central.	Marfleet.	Myton.	Newland.	North Newington.	Paragon.	Park.	Pickering.	St. Andrew's.	Southcoates.	South Newington.	Stoneferry.	Sutton.	University.	West Central.		
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera and Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	956	12	31	70	85	81	443	125	40	59	6	3	1	41	54	26	54	78	28	37	7	32	15	110	18	21	54	79	46	97	21	10	57	68	944	34
Erysipelas	102	2	4	2	1	—	5	4	5	10	15	41	13	11	5	1	3	5	8	3	3	3	3	4	1	3	3	7	6	3	5	2	10	13	1	3
Scarlet Fever	747	7	24	49	56	79	355	112	25	31	4	5	—	40	43	27	22	84	16	26	30	18	34	73	12	19	57	36	19	41	23	32	68	27	668	6
Enteric Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Relapsing Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Fever	3	—	—	—	—	—	—	—	—	3	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	5
Puerperal Pyrexia	50	—	—	—	—	—	—	—	1	39	10	—	—	4	4	4	3	8	1	1	2	3	1	1	1	—	—	3	2	5	3	—	—	4	—	—
Cerebro-spinal Fever	16	3	—	2	2	1	3	2	1	1	1	—	—	—	1	2	2	1	—	—	—	1	—	—	—	—	1	2	—	—	1	—	4	1	8	6
Acute Poliomyelitis	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—
Pemphigus Neonatorum	30	30	—	—	—	—	—	—	—	—	—	—	—	3	2	—	1	4	3	3	—	2	—	—	—	2	1	3	1	2	2	—	1	—	—	3
Ophthalmia Neonatorum	31	31	—	—	—	—	—	—	—	—	—	—	—	1	1	—	4	1	4	1	1	—	—	1	2	—	2	—	2	2	2	—	1	—	—	—
Measles	2541	58	105	131	163	164	1772	143	—	4	1	—	—	205	180	99	69	106	178	90	153	118	31	119	33	14	48	118	263	199	55	132	249	52	34	28
Anthrax	1	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hydrophobia (in Man)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chickenpox	2030	57	99	94	122	141	1356	130	21	9	—	—	1	87	130	61	68	121	73	101	93	58	73	122	19	27	141	156	85	95	60	95	239	126	1	—
Dysentery	11	—	—	2	—	1	6	—	—	—	2	—	—	—	—	4	—	—	—	—	4	—	—	—	—	—	—	—	1	—	—	2	—	—	5	—
Malaria	5	—	—	—	—	—	—	—	—	2	2	1	—	1	—	—	—	—	—	—	—	2	—	—	—	1	—	—	—	—	—	—	—	1	—	—
Glanders	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	3	—	—	—	—	—	—	—	—	2	—	—	1	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—	4
Polio Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia—																																				
Acute Primary	263	19	35	23	21	12	30	16	6	36	23	37	5	11	21	4	2	15	21	22	9	4	9	7	7	6	4	11	32	12	7	5	25	26	—	271
Acute Influenzal	16	—	—	—	1	—	—	2	1	1	2	6			1	—	1	3		—	2	—	1	1	—		2			1	—	2	1	1		
	6806	219	299	373	451	479	3970	534	100	200	66	94	21	415	415	229	229	426	332	281	305	241	167	438	93	124	311	415	457	458	179	281	655	319	1661	361

APPENDIX 22.

INFECTIOUS DISEASES.

Table showing the Number of Cases notified, the Number of such Cases admitted to the Infectious Diseases Hospitals, and the Total Number of Deaths during the years stated.

Disease.	1905.			1915.			1925.		
	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.
Smallpox	45	45	2	—	—	—	59	59	—
Cholera and Plague	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	708	208	72	669	470	58	498	455	26
Erysipelas	316	—	20	187	—	10	119	—	7
Scarlet Fever	675	326	26	598	436	5	419	327	4
Typhus Fever	—	—	—	—	—	—	—	—	—
Enteric Fever	128	53	22	94	51	14	26	14	3
Relapsing Fever	—	—	—	—	—	—	—	—	—
Continued Fever	4	—	—	1	—	—	—	—	—
Puerperal Fever	27	—	4	19	—	14	14	—	7
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	—	—	—	7	6	4	8	—	4
Poliomyelitis	—	—	—	—	—	—	2	—	2
Pemphigus Neonatorum	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	80	—	—	67	—	—
Measles	541	1	22	1225	22	37	365	5	64
Anthrax	—	—	—	—	—	—	—	—	—
Hydrophobia (in Man)	—	—	—	—	—	—	—	—	—
Chickenpox	—	—	—	—	—	—	1442	9	—
Dysentery	—	—	—	—	—	—	2	1	—
Malaria	—	—	—	—	—	—	6	—	—
Glanders	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	—	—	—	—	—	23	—	21
Polio-Encephalitis	—	—	—	—	—	—	2	—	2
Pneumonia	—	—	267	—	—	431	292	—	375
	2444	633	435	2880	985	576	3344	870	515

Disease.	1930.			1931.			1932.		
	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.
Smallpox	—	—	—	—	—	—	—	—	—
Cholera and Plague	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	856	801	47	1145	1118	94	1707	1672	133
Erysipelas	170	1	7	115	—	5	83	—	2
Scarlet Fever	538	450	5	546	457	3	456	389	7
Typhus Fever	—	—	—	—	—	—	—	—	—
Enteric Fever	35	30	3	13	10	4	23	21	2
Relapsing Fever	—	—	—	—	—	—	—	—	—
Continued Fever	—	—	—	—	—	—	—	—	—
Puerperal Fever	27	—	8	22	—	11	14	—	12
Puerperal Pyrexia	46	—	—	43	—	—	56	—	—
Cerebro-Spinal Fever	8	1	6	14	8	11	13	12	5
Poliomyelitis	7	5	1	6	3	—	9	5	2
Pemphigus Neonatorum	66	—	6	28	—	3	43	—	3
Ophthalmia Neonatorum	37	—	—	26	—	—	31	—	—
Measles	2451	56	100	621	19	70	944	3	15
Anthrax	3	—	1	—	—	—	2	1	—
Hydrophobia (in Man)	—	—	—	—	—	—	—	—	—
Chickenpox	1867	10	—	1691	—	—	1487	—	—
Dysentery	2	—	1	2	—	2	—	—	—
Malaria	2	—	—	3	—	—	4	—	—
Glanders	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	4	—	3	5	2	6	3	1	2
Polio-Encephalitis	1	—	—	1	—	—	1	—	—
Pneumonia	382	—	326	407	—	449	341	—	271
	6502	1354	514	4688	1617	658	5217	2104	454

Disease.	1933.			1934.			1935.		
	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.	No. of Notifications.	Admissions to Infectious Diseases Hospitals.	Deaths.
Smallpox	—	—	—	—	—	—	—	—	—
Cholera and Plague	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup)	1517	1489	92	1076	1057	65	956	944	34
Erysipelas	149	—	12	143	—	7	102	1	3
Scarlet Fever	426	351	1	753	635	8	747	668	6
Typhus Fever	—	—	—	—	—	—	—	—	—
Enteric Fever	9	8	1	10	9	2	—	—	1
Relapsing Fever	—	—	—	—	—	—	—	—	—
Continued Fever	—	—	—	—	—	—	—	—	—
Puerperal Fever	8	—	10	13	—	16	3	—	5
Puerperal Pyrexia	60	—	—	57	—	—	50	—	—
Cerebro-Spinal Fever	21	14	6	20	13	7	16	8	6
Poliomyelitis	36	28	4	5	5	2	1	—	—
Pemphigus Neonatorum	35	—	—	26	—	2	30	—	3
Ophthalmia Neonatorum	40	—	—	32	—	—	31	—	—
Measles	1552	1	42	874	—	3	2541	34	28
Anthrax	1	1	—	—	—	—	1	—	—
Hydrophobia (in Man)	—	—	—	—	—	—	—	—	—
Chickenpox	1311	—	—	1567	—	—	2030	1	—
Dysentery	4	—	1	1	—	—	11	5	—
Malaria	3	—	—	5	—	—	5	—	—
Glanders	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	2	1	4	3	—	6	3	—	4
Polio-Encephalitis	2	1	—	1	—	—	—	—	—
Pneumonia	544	—	365	383	—	258	279	—	271
	5720	1894	538	4969	1719	376	6806	1661	361

APPENDIX 23.

NATURE OF AFTER-EFFECTS REMAINING FROM AN ATTACK OF ENCEPHALITIS LETHARGICA.

Cases which have been officially notified to the Health Department :—

No.	Date Notified.	Sex.	Age at time of Notification.	Condition at end of year, 1935.
1	2/5/24	Female	21	Condition unchanged. General health good, but unable to speak. Still under private medical treatment. No improvement.
2	18/8/25	Male	12	General health good ; following occupation, but still has tendency to become drowsy when not occupied.
3	25/1/27	Male	18	Headaches, nervous trembling and sweating. Ravenous appetite when trembling fits cease.
4	14/11/29	Male	33	Died 3rd February, 1935.
5	6/3/30	Male	33	Lives out of City, but no change in condition reported. Under medical treatment.
6	19/9/30	Male	19	Continued improvement reported.
7	21/4/31	Male	34	Condition unchanged. Paralysis continues in left arm and left foot. General health otherwise good—is able to work.
8	16/6/32	Female	11	Now quite well and in employment.
9	12/5/33	Male	3	Now normal—attending school.
10	26/6/34	Male	63	Died 28th February, 1935.

APPENDIX 23—*Continued.*

CASES REPORTED TO BE SUFFERING FROM AFTER-EFFECTS OF ENCEPHALITIS LETHARGICA.

These cases have not been officially notified in accordance with the Regulations :—

Initials.	Age at time of attack.	Date of Attack of Encephalitis Lethargica.	Present Condition.
E.G.	15	Feb., 1924	No improvement in patient's condition ; still in Home at Skeffling.
O.R.S.	15	Mar., 1924	Died 19th October, 1935, at City Mental Hospital.
N.D.	15	Dec., 1922	Removed—present address not known.
M.A.	16	— 1923	Has lived out of Hull during the year—reported that her condition is unchanged.
V.B.	15	June, 1924	No change in condition—eats abnormally, helpless and talks very little—sleeps well.
R.W.	11	May, 1924	Still at Rampton State Institution, near Retford. No report on his condition available.
J.K.R.	18	May, 1930	No improvement in condition—patient quiet—walks with unsteady gait.
D.T.	22	— 1929	Still in Mental Hospital. Condition unchanged.
T.W.E.B.	31	— 1930	Condition unchanged—no paralysis but usual syndrome.
A.N.	19	Aug., 1922	Removed ; present address not known.
E.M.B.	25	— 1926	Paralysis of legs—suffers from severe headaches. No change in condition reported.
W.G.J.	23	— 1930	No further improvement reported—trembling of limbs continues, but he is able to go about by himself.
E.B.	36	Feb., 1930	Has been in hospital four months of the year—condition unchanged.
H.M.	—	—	Admitted City Mental Hospital, October, 1935—limbs and speech affected.
M.B.	12	— 1925	No improvement in condition—no energy—sleeps badly—limbs also affected.
E.A.T.	—	—	Trembling of limbs—can walk and feed herself—no improvement in condition—becomes noisy at times—has been in Institution since August, 1934.

APPENDIX 24.

VACCINATION.

RETURNS MADE BY THE VACCINATION OFFICERS RESPECTING THE VACCINATION OF hildren WHOSE BIRTHS WERE REGISTERED DURING THE YEAR 1934.

Registration Sub-Districts.	No. of Births in "Birth List Sheets" 1st Jan. to 31st Dec., 1934.	Successfully vaccinated.	Insusceptible to Vaccination.	Had Smallpox.	Conscientious Objections.	Died Unvaccinated.	Unentered in the Vaccination Register on account of :—			
							Postponement by Medical Certificate.	Removals to other Districts.	Removed. Not traceable.	Unaccounted for.
ypool	1674	909	6	—	620	97	4	6	28	4
uthcoates	519	283	2	—	202	19	1	3	5	4
ast Sculcoates	443	231	4	—	182	18	1	1	4	2
est Sculcoates	799	361	5	—	381	37	—	1	12	2
amber	302	209	1	—	72	11	1	2	4	2
ton	913	488	1	—	343	39	5	10	22	5
ssle	954	482	2	—	402	44	1	6	13	4
ttingham	337	155	1	—	164	10	—	1	5	1
rlaugh	18	8	—	—	10	—	—	—	—	—
Totals	5959	3126	22	—	2376	275	13	30	93	24

APPENDIX 25.

CITY HOSPITAL AND EVAN FRASER HOSPITAL.

REPORT BY THE MEDICAL SUPERINTENDENT, DR. H. MASON LEETE.

City Hospital, Castle Hill, Cottingham. In course of construction, and to accommodate 350 to 400 beds when completed. Beds available at the end of the year, 215.

Evan Fraser (Smallpox) Hospital, Sutton on Hull—150 beds.

Staff—

Medical Superintendent—H. MASON LEETE, M.D., M.R.C.S., D.P.H.
Resident Medical Officer, City Hospital—G. A. W. NEIL, M.B., Ch.B.
Matron—Miss J. ARMSTRONG, R R.C.
1 Deputy Matron.
1 Sister (acting Matron).
1 Sister Tutor.
9 Sisters.
13 Staff Nurses.
45 Probationer Nurses.

GENERAL SURVEY.

The City Hospital dealt with cases of diphtheria, scarlet fever, enteric fever, cerebrospinal fever and the infectious diseases generally. Evan Fraser Hospital was still used chiefly in connection with scarlet fever, but alterations were made during the year with regard to admissions. Direct admissions to Evan Fraser Hospital ceased on the 1st June, and from that date only transfers from the City Hospital were admitted. These were scarlet fever convalescents and later on diphtheria convalescents and carriers. All acute cases were admitted to the City Hospital, an arrangement which assured immediate medical attention and the carrying out at once of any bacteriological and other diagnostic investigations which were required. The accommodation for scarlet fever at the City Hospital was one 38-bed ward and one 28-bed ward. Our experience during recent years shows that not until 100 more beds are available at the City Hospital, will the accommodation be sufficient to meet the needs of the City for diphtheria and scarlet fever when the incidence of both these diseases is above the average. As other diseases have to be provided for, it will be seen that a final figure in the neighbourhood of 400 beds for the completed hospital is by no means too high. In infectious diseases work there is always considerable fluctuation and when the incidence of diseases such as diphtheria and scarlet fever is low, the accommodation available will be used for the other infectious diseases such as measles and whooping cough, for which, at present, there is no special provision.

NOTE AS TO THE FORM OF THIS REPORT.

This report follows the form introduced in 1931. The main tables and analyses refer to cases treated to a conclusion during 1935 classified according to the final hospital diagnoses. The figures are comparable with those of 1931 and following years, but not with those of previous years.

NUMBERS DEALT WITH DURING 1935 AT THE CITY HOSPITAL AND EVAN FRASER HOSPITAL.*

In Hospital, January 1st.	Admitted during year.	Discharged during year.	In Hospital, December 31st.
254	1747	1787	214

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* For the number of cases dealt with at the Evan Fraser Hospital, see page 217.

APPENDIX 25—*Continued.*

CLASSIFICATION ON ADMISSION.

Diphtheria	974
Scarlet fever	697
Other infections diseases	54
Other diseases	12
Observation....	10
	1747

DISEASES TREATED TO A CONCLUSION DURING THE YEAR, CLASSIFIED ACCORDING TO THE FINAL OR HOSPITAL DIAGNOSIS.

TABLE A. DIPHTHERIA.

Ages.	*Males.*	*Females.*	*Total.*	*Deaths.*
Under 1 year	4	5	9	—
1—2 years	10	14	24	4
2—3 years	26	14	40	2
3—4 years	42	30	72	7
4—5 years	44	34	78	7
5—10 years	172	172	344	9
10—15 years	55	64	119	2
15—20 years	9	17	26	—
20—25 years	8	12	20	—
25 years and over	3	18	21	1
Total	373	380	753	32

According to the type of disease the 753 cases are classified as follow :—

Faucial	618
Laryngeal	31
Carriers	104
Other	—
	753

Many cases are sent into hospital as diphtheria which prove on further investigation be suffering from some other disease. Of the 974 cases notified and admitted as diphtheria, diagnosis was confirmed in 753, both figures including carriers. The remainder were re-gnosed as follows :—

Tonsillitis	180
Simple laryngitis ...	14
Broncho-pneumonia . .	10
Scarlet fever ..	8
Measles . ..	6
Other conditions ...	3
	221

APPENDIX 25—*Continued.*

The re-diagnosed cases are excluded from the hospital diphtheria tables, and included under the appropriate table according to the final hospital diagnosis.

Diphtheria carriers are cases where there are no clinical signs of diphtheria, but where a diphtheria-like germ has been found in throat, nose or other site either by an outside bacteriologist or at the hospital. Such cases, though they need isolation, are not suffering from diphtheria, and should not therefore be included in the final statistics and especially in the calculation of the death-rate. There were 104 carriers in the total of 753 diphtheria cases, and in many the carrier condition was not confirmed in hospital—but all carriers, confirmed or otherwise, are omitted in the following tables which show true clinical diphtheria only.

The diagnosis was confirmed in practically all cases by bacteriological examination, though the final diagnosis is on a clinical basis. The cases re-diagnosed as tonsillitis all gave at least three successive negative throat swabs on admission.

Faucial and laryngeal diphtheria differ so much in symptoms, treatment and outcome that it is essential to deal with them separately, and the following tables show the figures for the current year compared with the 4 previous years, in each type of disease. Under the heading of faucial diphtheria are included faucio-nasal and nasal cases. Laryngeal cases are those which showed definite laryngeal symptoms on admission, the diagnosis of diphtheria being confirmed by clinical, laryngoscopic and bacteriological examination.

TABLE A1. FAUCIAL DIPHTHERIA.

Proven clinical cases (excluding carriers).

Year.	Number.	Paralysed Cases (non-fatal).	Deaths.	Paralysis Rate per cent.	Mortality Rate per cent
1931.	671	50	91	7·5	13·6
1932.	1046	90	113	8·6	10·8
1933.	912	85	76	9·3	8·3
1934.	688	84	55	12·2	8·0
1935.	**618**	**63**	**22**	**10·2**	**3·6**

TABLE A2. LARYNGEAL DIPHTHERIA.

Proven clinical cases.

Year.	Number.	Paralysed Cases (non-fatal).	Deaths.		Mortality Rate per cent.
			Obstructive.	Toxic.	
1931.	46	3	7	–	15·2
1932.	25	1	10	1	44·0
1933.	37	3	8	1	24·3
1934	22	1	5	–	22·7
1935.	**31**	**2**	**7**	**2**	**29·0**

APPENDIX 25—*Continued.*

Diphtheria was much less severe than in previous years. An accurate index of severity the faucial case mortality rate (shown in Table XI) which is less than half that of the two preceding years.

This decrease in severity would appear to be due to two main causes. Firstly, "gravis" trains of the diphtheria bacillus are not so numerous as they were, and secondly, because diphtheria has been so severe for the past few years, an increased immunity to it has been built up in the population. Though doubtless in the main this has been a natural process, it s fair to assume that it will have been augmented to some extent by the artificial immunisation of children at the clinics.

Of the 31 laryngeal cases, 18 required tracheotomy, and of these 8 died.

The average duration of treatment of the diphtheria cases discharged was 48·8 days. This compares with 41·2 days in 1934 and 39·14 days in 1933.

It is still necessary to stress the need for rapidity in dealing with diphtheria or suspected iphtheria. Swab results should not be waited for but treatment or removal to hospital should be carried out if the clinical findings suggest diphtheria. Many cases arrive in hospital too ate for treatment to be effective. Of the 32 fatal cases, 11 died within 48 hours of admission. Attention is drawn elsewhere in the report to the attempts made to solicit the co-operation f parents and doctors in securing early admission of the cases to hospital.

TABLE B. SCARLET FEVER.

Ages.	*Males.*	*Females.*	*Total.*	*Deaths.*
Under 1 year	2	3	5	—
1—2 years	10	12	22	1
2—3 years	24	29	53	2
3—4 years	32	32	64	1
4—5 years	28	47	75	1
5—10 years	139	153	292	2
10—15 years	41	50	91	—
15—20 years	13	14	27	1
20—25 years	2	9	11	—
25 years and over	11	10	21	—
Total	302	359	661	8

Of the 697 cases admitted during the year notified as scarlet fever, the diagnosis was onfirmed in 618. The remainder were re-diagnosed as follows:—

Rubella	42
Food and drug rashes	14
Tonsillitis	10
Measles	7
Diphtheria	1
Other conditions	5
	79

APPENDIX 25—*Continued.*

Complications and Deaths.

In the 661 cases the scarlatinal complications were as follow :—

Complication.	*No. of Cases.*	*Rate %*
Late Adenitis	49	7·4
Rhinitis	71	10·7
Otorrhœa	55	8·3
Arthritis	5	0·8
Albuminuria	60	9·1
Relapse	31	4·7

Of the 8 deaths, 4 were due to associated measles and broncho-pneumonia ; 1 to post scarlatinal diphtheria, 1 to streptococcal septicæmia, 1 to empyema and 1 to secondary hæmorrhage from a severely ulcerated throat.

The case mortality is 1·2 per cent. The average duration of treatment in hospital was 41·0 days.

Comments.

Scarlet fever maintained its mild type. The relapse rate is high, though this has been a feature of the disease locally for some time. A case is only recorded as a " relapse " if there are definite symptoms of scarlet fever (including the rash) recurring in a case where the primary diagnosis is beyond doubt.

TABLE C. OTHER INFECTIOUS DISEASES.

Disease.	*Males.*	*Females.*	*Total*	*Deaths*
Enteric fever	5	1	6	—
Cerebro-spinal fever	2	2	4	1
Measles	19	26	45	5
Chickenpox	—	2	2	—
Rubella	14	29	43	—
Total	40	60	100	6

Of the 6 enteric fever cases, 4 suffered from typhoid infection, 1 from paratyphoid A, and 1 from paratyphoid B. The majority of the measles cases were admitted during February and March, when a ward was opened to relieve the pressure on the Public Assistance Institution Hospitals. The 5 deaths were all due to broncho-pneumonia, 4 being in children under the age of two years. The rubella cases were all sent in as scarlet fever.

TABLE D. OTHER DISEASES.

Disease.	*Males.*	*Females.*	*Total.*	*Deaths.*
Tonsillitis	80	117	197	—
Bronchitis and Broncho-pneumonia	9	7	16	2
Simple Laryngitis	9	6	15	—
Malaria	8	—	8	1
Drug, Food and Septic Rashes	6	13	19	—
Enteritis	3	3	6	1
Miscellaneous	8	4	12	—
Total	123	150	273	4

APPENDIX 25—*Continued.*

The cases of tonsillitis were practically all sent to hospital as cases of diphtheria, but he diagnosis of tonsillitis was confirmed by subsequent observation and bacteriological xamination. Included in the category of tonsillitis are cases of pharyngitis, quinsy and ther septic throat conditions.

SUMMARY OF CASES DISCHARGED.

Table A	753
,, B	661
,, C	100
,, D	273
Total	1787

EAR, NOSE AND THROAT WORK.

Dr. Ritchie Rodger or Dr. Simpson visited the hospital from time to time. They were also n call for emergencies. Three operations were performed for the removal of tonsils and denoids and 2 for mastoid disease. In addition, 13 examinations by direct laryngoscopy were arried out in cases of laryngeal or suspected laryngeal diphtheria, and there was also 1 ninor operation.

LABORATORY.

he examinations carried out in the hospital laboratory were as follow :—

Nature of Examination.	No. of specimens.
Cultures for B. diphtheria	7050
Blood for agglutination tests	24
Blood cultures	6
Blood films	8
Cerebro-spinal fluid	39
Urines for special examination	2044
Fæces for enteric organisms	34
Sputum for B. tuberculosis	2
Cultures for hæmolytic streptococci	27
Various	11
Total	9245

In addition to the routine work tabulated above, special research into the type of diphtheria cillus present in Hull was undertaken and during the year 291 cases were investigated in tail.

The laboratory is licensed for inoculation experiments and during 1935, 27 experiments re performed. These were chiefly virulence tests in diphtheria, but specimens of sputum l pleural fluid were examined for the Sanatorium and the Tuberculosis Dispensary.

In addition, Dr. Gwyneth Griffith, of the Maternity Home, performed 20 inoculation periments for the diagnosis of pregnancy.

APPENDIX 25—*Continued.*

SCHICK AND DICK TESTS.

Immunisations.

Routine testing of the nursing and domestic staffs against diphtheria and scarlet fever was continued and susceptibles were immunised before coming in contact with infection.

In addition, a certain number of tests were made on members of the public, usually at the request of their own medical advisers. The number of persons so dealt with is indicated below.

	Positive.	*Negative.*	*Total.*
SCHICK TESTING.			
Nurses	23	16	39
Maids	3	16	19
Others	11	5	16
DICK TESTING.			
Nurses	10	29	39
Maids	2	18	20
Others	1	—	1

In the positive subjects of both groups, the necessary immunising courses and re-tests were made. At the end of the year, of the 38 staff positive, 25 had been rendered negative, and 13 were still under treatment. The tests and immunisations detailed above necessitated 101 Schick tests, 67 Dick tests and 96 prophylactic inoculations.

In addition 15 nurses and 8 maids were immunised against Enteric fever

PATIENTS FROM OUTSIDE AUTHORITIES ADMITTED TO CITY HOSPITALS :—

Diphtheria	17	Deaths	2
Scarlet fever	24	,, ...	—
Anthrax	1	,, ...	—
	42		2

The cost of maintenance of these patients was charged to the Local Authorities concerned. Particulars are as under :—

Cottingham Urban District Council	Diphtheria—13 cases Scarlet fever—7 cases
Sculcoates Rural District Council	Diphtheria—2 cases Scarlet fever—8 cases
Haltemprice U.D.C.	Scarlet fever—9 cases
Hedon Corporation	Diphtheria—2 cases
East Riding County Council	Anthrax—1 case

Those of the cases which had been discharged at the end of the year are included in the foregoing tables.

SICKNESS AMONGST HOSPITAL STAFF.

Two members of the hospital staff (both nurses) contracted diphtheria and were admitted to the wards. One case was moderately severe and occurred in a new Schick-positive subject before she could be immunised.

One nurse was admitted to the wards suffering from acute rheumatism and one with severe anaemia. One was admitted for tonsillectomy.

APPENDIX 25—*Continued.*

Twenty-four cases of illness necessitating treatment in bed occurred among the nursing nd domestic staffs and were treated in the home during the year.

These were :—

Diphtheria	4	Abdominal (observation)	2
Tonsillitis	16	Accidents ...	2

Port Sanitary Cases. Sixteen cases were sent in by the officers of the Port Sanitary uthority for treatment at the City Hospital. Seventeen (including one admitted in 1934) ere discharged during the year and the final diagnoses in these cases were :—

Typhoid fever	6
Malaria	8
Enteritis	1
Cirrhosis of liver	1
Pneumonia	1

All the above cases have been included in the appropriate foregoing tables.

EVAN FRASER HOSPITAL.

The total number of cases dealt with at Evan Fraser Hospital during 1935 is shown in e following table. These figures are included in the main admission and discharge table own on page 210.

	In Hospital, Jan. 1st.	Admitted direct during Year.	Trans. from City Hospital.	Trans. to City Hospital.	Dis-charged.	In Hospital, December 31st.
arlet fever	61	90	158	11	279*	19
iphtheria .	—	—	22	4	18	—

* Includes 2 deaths.

As accommodation at the City Hospital increases, admissions to the Evan Fraser Hospital ll correspondingly decrease.

It should be noted, however, that the accommodation at the Evan Fraser Hospital proved great value in releasing wards at the City Hospital for diphtheria during the marked outbreak the winter of 1932–33. The accommodation provided was also essential during 1934 and 35 when both diphtheria and scarlet fever showed an incidence above the average. The commodation at this hospital will be needed as reserve accommodation for epidemic periods r some years yet. As it is the smallpox hospital for the City it has in any case to be maintained.

The details of cases discharged will be found in the appropriate preceding tables.

Smallpox. No case of smallpox or suspected smallpox was admitted during the year.

APPENDIX 26.

REPORT OF CITY BACTERIOLOGIST.

Tables showing the results of the examination of Bacteriological (Pathological) specimens received during the year :—

		Results of Examination.		
Disease Suspected.	*Total.*	*Positive.*	*Doubtful.*	*Negative.*
Diphtheria	3954	395	159	3400
Tubercle (Pulmonary)	2705	738	—	1967
Do. (Non-Pulmonary)	32	2	—	30
Enteric Fevers (blood for diagnosis)....	34	11	—	23
Enteric Fevers (excreta)	10	1	—	9
Ringworm	2	—	—	2
Totals	6737	1147	159	5431

In addition, milks (287) and miscellaneous specimens (192) were examined.

A. R. TANKARD, F.I.C.

APPENDIX 27.

CANCER DEATHS, 1935.

SITE OF DISEASE.	0—20 M.	0—20 F.	20—40 M.	20—40 F.	40—60 M.	40—60 F.	60—80 M.	60—80 F.	80–over M.	80–over F.	Totals. M.	Totals. F.	Grand Totals. 1935
Buccal Cavity and Pharynx ..	—	—	—	—	8	1	14	4	1	2	23	7	30
Digestive Organs and Peritoneum	—	1	4	1	39	33	94	62	9	6	146	103	249
Respiratory Organs	—	—	2	—	21	3	15	4	—	—	38	7	45
Uterus	—	—	—	2	—	21	—	11	—	1	—	35	35
Other Female Genital Organs	—	—	—	—	—	12	—	4	—	—	—	16	16
Breast	—	—	—	2	—	16	—	21	—	—	—	39	39
Male Genito-Urinary Organs	—	—	—	—	3	—	12	—	1	—	16	—	16
Skin	—	—	—	—	1	2	1	—	—	—	2	2	4
Other or unspecified Organs	—	1	1	2	2	6	11	10	1	2	15	21	36
Totals	—	2	7	7	74	94	147	116	12	11	240	230	470

APPENDIX 28.

TUBERCULOSIS SANATORIUM, COTTINGHAM—STATISTICS.

		In Institution on Jan. 1, 1935.	Admitted during the year 1935.	Discharged during the year 1935.	Died in the Institution, 1935.	In Institution on Dec. 31, 1935.
Number of doubtfully Tuberculous cases admitted for observation	Adult Males	1	3	4	—	—
	Adult Females	—	8	8	—	—
	Children ...	3	24	25	—	2
	TOTAL ...	4	35	37	—	2
Number of definitely Tuberculous Patients admitted for treatment	Adult Males ...	51	105	91	11	54
	Adult Females	36	74	65	9	36
	Children	33	26	27	3	29
	TOTAL	120	205	183	23	119
GRAND TOTAL		124	240	220	23	121

The admissions were classified as under :—

	Classification.	Adult Males.	Adult Females.	Children.	Totals.	
					1935	1934
Pulmonary.	T.B. Minus ...	16	13	9	38	69
	T.B. +1	15	10	2	27	24
	T.B. +2	63	46	1	110	129
	T.B. +3	7	1	—	8	7
Non-Pulmonary	Bones and Joints....	1	1	5	7	3
	Abdominal ...	1	2	5	8	9
	Other Organs	2	1	—	3	2
	Peripheral Glands	—	—	4	4	5
	Observation ...	3	8	24	35	35
	TOTALS ...	108	82	50	240	283

APPENDIX 28—*Continued.*

TUBERCULOSIS SANATORIUM, COTTINGHAM—STATISTICS—*Continued.*

Immediate Results of Treatment of Definitely Tuberculous Patients Discharged in 1935.

lassifica-tion on dmission to the stitution.	Condition at time of Discharge.	Duration of Residential Treatment in Institution.															Grand Total.
		Over 28 dys. and under 3 months			3 6 months			6 12 months			More than 12 months			Totals.			
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Class T.B. Minus.	Quiescent	3	1		2	3	1	3	4	12	1	–	1	9	8	17	31
	Not Quiescent	2	1		4	1		1	1	–	–	2		7	5		12
	Died in Inst.	1	2	–		–	–	–	–	–	–	–	–	1	2		3
Class T.B Plus. Group I.	Quiescent			–	–	1		4	–	–	–	–	–	4	1	-	5
	Not Quiescent	6	1	–	1	5	–	3	2	–	–	1	–	10	9	–	19
	Died in Inst...			–	1		–	–	–	–	–	–	–	1	–	–	1
Class T.B. Plus. Group II.	Quiescent	–	–	–	–	1	–		1	–	–	1	–		3	–	3
	Not Quiescent	14	11	–	19	11	1	15	8	1	2	4		50	34	2	86
	Died in Inst.	3	1	–	1	1	1	4	3	–	–	–	2	8	5	3	16
Class T.B. Plus. Group III.	Quiescent	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
	Not Quiescent	1	–	–	2	–	–	2	–	–	–	–	–	5	–	–	5
	Died in Inst.	1	–	–	–	–	–	–	–	–	–	–	–	1	–	–	1
Pulmonary Totals		31	17		30	23	3	32	19	13	3	8	6	96	67	22	185
Bones and Joints.	Quiescent	–	–	–	–	–	–	–	–	–	–	–	2	–	–	2	2
	Not Quiescent				–	–	–	–	–	–	–	–	–	–	–	–	–
	Died in Inst...	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Abdom-inal.	Quiescent	–	–		–	–	–	–	–	3	–	–	1	–	–	4	4
	Not Quiescent	–	–	2	1	–	–	–	–	–	–	–	–	1	–	2	3
	Died in Inst.	–	–	–	–	–	–	–	–	–	–	–	–		–	–	–
Other Organs.	Quiescent ...		–	–	–	–	–	–	–	–	–	–	–		–		–
	Not Quiescent	–	–	–	–	–	–	–	–	–	–	–	–		–	–	
	Died in Inst...	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Peri-pheral Glands.	Quiescent	–	–	–	–	–	–	–	–	–	–	–	–	–	–		
	Not Quiescent	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
	Died in Inst....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Non Pulmonary Totals ...			–	2	1	–			–	3		–	3	1		8	9
AND TOTALS		31	17	2	31	23	3	32	19	16	3	8	9	97	67	30	194

Average stay in Sanatorium expressed in days :—

	Male.	Female.	Children.
No. of Patients	106	82	55
Average No. of Days ...	144·7	137	206·2

APPENDIX 29.

FIRST SCHEDULE

(A) RETURN SHOWING THE WORK OF THE TUBERCULOSIS DISPENSARIES DURING THE YEAR.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				GRAND TOTALS.
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—NEW CASES examined during the year (excluding contacts) :—													
(*a*) Definitely tuberculous	167	101	3	11	18	24	16	33	185	125	19	44	373
(*b*) Diagnosis not completed	—	—	—	—	—	—	—	—	4	2	4	3	13
(*c*) Non-tuberculous	—	—	—	—	—	—	—	—	147	156	70	62	435
B.—CONTACTS examined during the year :—													
(*a*) Definitely tuberculous	1	3	2	5	—	1	1	2	1	4	3	7	15
(*b*) Diagnosis not completed	—	—	—	—	—	—	—	—	—	1	4	4	9
(*c*) Non-tuberculous	—	—	—	—	—	—	—	—	96	208	241	232	777
C.—CASES written off the Dispensary Register as :													
(*a*) Recovered	16	18	12	11	6	6	22	18	22	24	34	29	109
(*b*) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	—	—	—	—	—	—	—	—	252	371	318	299	1240
D.—NUMBER OF CASES on Dispensary Register on December 31st :—													
(*a*) Definitely tuberculous	506	342	110	120	65	67	106	94	571	409	216	214	1410
(*b*) Diagnosis not completed	—	—	—	—	—	—	—	—	4	3	8	7	22

APPENDIX 29 —*Continued.*

RETURN SHOWING THE WORK OF THE TUBERCULOSIS DISPENSARIES DURING THE YEAR—*Continued.*

Number of cases on Dispensary Register on January 1st	1446
Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	42
Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"	103
Cases written off during the year as Dead (all causes)	226
Number of attendances at the Dispensary (including contacts)	7769
Number of Insured Persons under Domiciliary Treatment on the 31st December	53
Number of consultations with medical practitioners :—	
(*a*) Personal	213
(*b*) Other	4130
Number of visits by Tuberculosis Officers to Homes (including personal consultations)	576
Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	11089
Number of :—	
(*a*) Specimens of sputum, etc. examined	1394
(*b*) X-ray examinations made in connection with Dispensary work	1156
Number of "Recovered" cases restored to Dispensary Register, and included in A (*a*) and A (*b*) above	7
Number of "T.B. plus" cases on Dispensary Register on December 31st	573

NUMBER OF DISPENSARIES FOR THE TREATMENT OF TUBERCULOSIS (excluding centres used only for special forms of treatment).

Provided by the Council	2
Provided by Voluntary Bodies	—

D. DIAMOND,
Senior Tuberculosis Officer.

APPENDIX 29—*Continued.*

C.—NUMBER OF BEDS AVAILABLE FOR THE TREATMENT OF TUBERCULOSIS ON THE 31ST DECEMBER, 1935, IN INSTITUTIONS BELONGING TO THE COUNCIL.

Name of Institution.	For Pulmonary Cases.		For Non-Pulmonary Cases.		Total.
	Adults.	Children under 15.	Adults.	Children under 15.	
Hull Municipal Tuberculosis Sanatorium, Cottingham	84	31	4	10	129
POOR LAW INSTITUTIONS :—					
Anlaby Road Institution (Hospital)	32	—	As required.		32
Beverley Road Institution (Hospital)	—	—	11	14	25
TOTAL	116	31	15	24	186

APPENDIX 29—*Continued.*

) Return Showing the Extent of Residential Treatment and Observation during the Year in Institutions (other than Poor Law Institutions) Approved for the Treatment of Tuberculosis.

		In Institutions on Jan. 1 (1)	Admitted during the year (2)	Discharg'd during the year (3)	Died in the Institutions (4)	In Institutions on Dec. 31 (5)
umber of doubtfully berculous cases mitted for observa- n	Adult males	1	3	4	—	—
	Adult females	–	8	8	—	—
	Children	3	24	25	—	2
	Total	4	35	37	—	2
mber of patients fering from pul- mary tuberculosis	Adult males	51 13†	101 11†	90 14†	11 —	51 10†
	Adult females	36	70	65	9	32
	Children	24 2†	12 4†	19 3†	3 —	14 3†
	Totals	111 15†	183 15†	174 17†	23 —	97 13†
mber of patients fering from non- monary tuber- s	Adult Males	— 1†	4 2†	1 3†	— —	3 —
	Adult females	—	4	—	—	4
	Children	9 10§	14 3§	8 4§	— 1§	15 8§
	Totals	9 10§ 1†	22 3§ 2†	9 4§ 3†	— 1§ —†	22 8§ —†
Grand Totals		124 10§ 16†	240 3§ 17†	220 4§ 20†	23 1§	121 8§ 13†

†Hull After-Care Colony, Walkington.

§Yorkshire Children's Orthopaedic Hospital, Kirbymoorside.

All others relate to the Sanatorium, Cottingham.

APPENDIX 29—*Continued.*

(E) RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT PROVIDED DURING THE YEAR IN POOR LAW INSTITUTIONS FOR PERSONS CHARGEABLE TO THE COUNCIL.

		In Institutions on Jan. 1.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31
Number of patients suffering from pulmonary tuberculosis admitted for treatment.	Adult Males	16	151	84	51	32
	Adult females	15	83	62	27	9
	Children	—	13	4	7	2
	Total	31	247	150	85	43
Number of patients suffering from non-pulmonary tuberculosis admitted for treatment	Adult males	11	27	20	8	10
	Adult females	8	17	15	5	5
	Children	19	39	36	11	10
	Total	38	83	71	24	25
Grand Total		69	330	221	109	68

(F) RETURN SHOWING THE RESULTS OF OBSERVATION OF DOUBTFULLY TUBERCULOUS CASES DISCHARGED DURING THE YEAR FROM INSTITUTIONS APPROVED FOR THE TREATMENT OF TUBERCULOSIS.

Diagnosis on discharge from observation.	For Pulmonary Tuberculosis.						For Non-Pulmonary Tuberculosis.						Totals.		
	Stay under 4 weeks.			Stay over 4 weeks.			Stay under 4 weeks.			Stay over 4 weeks.					
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous....	—	—	1	1	1	1	—	1	—	—	—	5	1	2	7
Non-tuberculous	1	1	2	2	4	13	—	—	1	—	—	—	3	5	16
Doubtful	—	1	—	—	—	2	—	—	—	—	—	—	—	1	2
Totals	1	2	3	3	5	16	—	1	1	—	—	5	4	8	25

APPENDIX 29—*Continued.*

RETURN SHOWING THE IMMEDIATE RESULTS OF TREATMENT OF DEFINITELY TUBERCULOUS ients DISCHARGED DURING THE YEAR FROM INSTITUTIONS APPROVED FOR THE TREATMENT OF TUBERCULOSIS.

ıfica- on m ssion the ution.	Condition at time of Discharge.	Duration of Residential Treatment in the Institution.												Totals.			Grand Total.
		Under 3 months.			3–6 months.			6–12 months.			More than 12 months.						
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
ss 3. us.	Quiescent ...	3	1	–	2	3	1	6	4	11	3	–	4	14	8	19	41
	Not Quiescent	2	1	–	4	1	1	1	1	–	–	2	–	7	5	1	13
	Died in Inst.	1	2		–	–	–	–	–	–	–	–	–	1	2	–	3
ss :. s. up I.	Quiescent ...	–	–	–	–	1	–	4	–	–	–	–	–	4	1	–	5
	Not Quiescent	6	1	–	1	5	–	3	2	–	–	1	–	10	9	–	19
	Died in Inst....	–	–	–	1	–	–	–	–	–	–	–	–	1	–	–	1
s . s. up II.	Quiescent ...		–	–	–	1	–	3	1	–	2	1	–	5	3	–	8
	Not Quiescent	16	11	–	19	11	1	17	8	1	2	4	–	54	34	2	90
	Died in Inst.	3	1	–	1	1	1	4	3	–	–	–	2	8	5	3	16
s . s. ıp III.	Quiescent ...	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	—
	Not Quiescent	1	–	–	2	–	–	2	–	–	–	–	–	5	–	–	5
	Died in Inst....	1	–	–	–	–	–	–	–	–	–	–	–	1	–	–	1
l Pulmonary		33	17	–	30	23	4	40	19	15	7	8	6	110	67	25	202
es ts.	Quiescent ..	–	–	–	–	–	–	1	–	1	–	–	5	1	–	6	7
	Not Quiescent	–	–	–	2	–	–	–	–	–	–	–	–	2	–	–	2
	Died in Inst....	–	–	–	–	–	–	–	–	1	–	–	–	–	–	1	1
om-	Quiescent ...	–	–	–	–	–	–	–	–	3	–	–	1	–	–	4	4
	Not Quiescent	–	–	2	1	–	–	–	–	–	–	–	–	1	–	2	3
	Died in Inst....		–	–	–	–	–	–	–	–	–	–	–	–	–	–	—
r ans.	Quiescent ...	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	—
	Not Quiescent	–	–	–	–	–	–	–	–	–	–	–	–		–	–	—
	Died in Inst....	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	—
al ds.	Quiescent	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	—
	Not Quiescent	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	—
	Died in Inst. .	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	—
Pulmonary Totals ...		–	–	2	3	–		1	–	5	–	–	6	4	–	13	17
TOTAL		33	17	2	33	23	1	41	19	20	7	8	12	114	67	38	219

APPENDIX 29—*Continued.*

PULMONARY TUBERCULOSIS—THIRD SCHEDULE.

SUPPLEMENTARY ANNUAL RETURN SHOWING IN SUMMARY FORM (*a*) THE CONDITION PRIOR TO 1926 AND FOR THE YEARS 1930 AND 1935 OF ALL PATIENTS REMAINING ON THE DISPENSARY REGISTER; AND (*b*) THE REASONS FOR THE REMOVAL OF ALL CASES WRITTEN OFF THE REGISTER.

Condition at the time of the last record made during the year to which the return relates.				Previous to 1926.					1930.					1935.				
				Class T.B. minus.	Class T.B. plus.				Class T.B. minus	Class T.B. plus				Class T.B. minus.	Class T.B. plus			
					Group 1	Group 2	Group 3	Total (Class T.B. plus).		Group 1	Group 2	Group 3	Total (Class T.B. plus).		Group 1	Group 2	Group 3	Total (Class T.B. plus).
(*a*) Remaining on Dispensary Register on 31st December.	Disease Arrested	Adults.	M.	2	3	—	—	3	4	2	—	—	2	—	—	—	—	—
			F.	2	1	—	—	1	6	—	4	—	4	—	—	—	—	—
		Child'n.		8	—	—	—	—	34	—	—	—	—	—	—	—	—	—
	Disease not Arrested	Adults.	M.	5	12	12	1	25	1	11	5	1	17	26	12	74	8	94
			F.	2	3	3	—	6	1	6	5	—	11	21	12	41	4	57
		Child'n.		5	1	1	—	2	5	—	—	—	—	11	3	2	—	5
	Condition not ascertained during the year			—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Total on Dispensary Register at 31st Dec.			24	20	16	1	37	51	19	14	1	34	58	27	117	12	156
(*b*) Not now on Dispensary Register and reasons for removal therefrom.	Discharged as Recovered	Adults.	M.	24	6	2	—	8	1	—	—	—	—	—	—	—	—	—
			F.	25	9	1	—	10	3	—	—	—	—	—	—	—	—	—
		Child'n.		261	—	—	—	—	13	1	—	—	1	—	—	—	—	—
	Lost sight of or otherwise removed from Dispensary Register			487	184	61	2	247	40	14	20	1	35	11	2	5	—	7
	Dead	Adults.	M.	17	3	28	117	148	10	31	38	54	123	5	1	23	10	34
			F.	7	1	20	68	89	8	14	14	45	73	2	—	13	6	19
		Child'n.		16	—	6	12	18	4	1	1	2	4	3	—	1	—	1
	Total written off Dispensary Register			837	203	118	199	520	79	61	73	102	236	21	3	42	16	61
Grand Totals ...				861	223	134	200	557	130	80	87	103	270	79	30	159	28	217

APPENDIX 29—*Continued.*

NON-PULMONARY TUBERCULOSIS—THIRD SCHEDULE

pplementary Annual Return Showing in Summary Form (*a*) the Condition prior to 1926 and for the Years 1930 and 1935 of all Patients remaining on the Dispensary Register; and (*b*) the reasons for the Removal of all Cases Written off the Register.

ition at the time of the ecord made during the to which the return relates.			Previous to 1926.					1930.					1935.				
			Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total.	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands	Total.
Disease Arrested	Adults.	M.	1	—	—	—	1	—	—	—	—	—	1	—	1	—	2
		F.	—	—	—	—	—	1	—	—	—	1	—	—	1	2	3
	Child'n.		2	—	—	—	2	2	1	1	2	6	—	—	—	—	—
Disease not Arrested	Adults.	M.	—	—	—	—	—	—	—	—	—	—	6	4	3	1	14
		F.	—	—	—	—	—	—	—	1	—	1	7	4	2	6	19
	Child'n.		—	—	3	1	4	2	—	—	1	3	12	4	4	24	44
Condition not ascertained during the year			—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total on Dispensary Register at 31st Dec.			3	—	3	1	7	5	1	2	3	11	26	12	11	33	82
nsferred to Pulmonary			—	—	—	—	—	2	1	—	—	3	—	—	—	—	—
Discharged as Recovered	Adults.	M.	5	1	—	3	9	—	—	—	—	—	—		—	—	—
		F.	4	1	—	3	8	—	—	—	2	2	—	—	—	—	—
	Child'n.		15	9	3	18	15	7	7	—	10	24		—	—		
Lost sight of or otherwise removed from Dispensary Register			25	3	10	13	51	14	2	3	5	24	2	—	—	1	3
Dead	Adults.	M.	2		1		3	—	—	—			—	—	2	—	2
		F.	—		1	—	1	1	—	—		1		2	1	—	3
	Child'n.		3	—	1		4	3	1	—	1	5	—		8		8
Total written off Dispensary Register			54	14	16	37	121	25	10	3	18	56	2	2	11	1	16
rand Totals of (*a*) and (*b*) (excluding those transferred to Pulmonary)			57	14	19	38	128	30	11	5	21	67	28	14	22	34	98

APPENDIX 29—*Continued.*

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930—SUMMARY OF NOTIFICATIONS.

Age Periods	Formal Notifications.												
	Number of Primary Notifications of New Cases.												Total Notifications (i.e., including cases previously notified by other doctors).
	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and upwards	Total	
Pulmonary—													
Males	1	4	4	4	20	24	47	46	37	29	4	220	268
Females	—	5	3	14	17	31	33	21	13	9	3	149	176
Non-Pulmonary—													
Males	1	5	15	8	5	14	5	6	—	—	—	59	62
Females	1	11	16	10	7	5	9	2	2	1	—	64	76
Total	3	25	38	36	49	74	94	75	52	39	7	492	582

SUPPLEMENTAL RETURN.

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period from the 1st January, to the 31st December, 1935, otherwise than by formal notification.

Age periods	0 to 1.	1 to 5.	5 to 10.	10 to 15.	15 to 20.	20 to 25.	25 to 35.	35 to 45.	45 to 55.	55 to 65.	65 and upwards	Total Cases.
Pulmonary—												
Males	1	1	1	—	—	2	—	3	1	4	2	15
Females	—	—	—	—	2	—	1	1	1	2	1	8
Non-Pulmonary:												
Males	1	6	1	1	—	—	3	—	2	—	—	14
Females	1	5	1	1	1	—	1	—	1	—	—	11
Total	3	12	3	2	3	2	5	4	5	6	3	48

Source of Information.	No. of Cases.	
	Pulmonary	Non-Pulmonary
Death Returns: From Local Registrars	7	12
Death Returns: Transferable Deaths from Registrar General	1	—
Posthumous Notifications	9	12
Transfers from other areas (other than transferable deaths)	6	1
Other sources if any (Letter)	—	—
	23	25

APPENDIX 29—*Continued.*

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

Number of cases of Tuberculosis remaining on the Registers of Notifications on the 31st December :—

YEAR.		PULMONARY.			NON-PULMONARY.			TOTAL CASES
		Males.	Females.	Total.	Males.	Females.	Total.	
1935		638	482	1120	180	166	346	1466
1934		625	489	1114	187	139	326	1440
1933	....	646	475	1121	191	173	364	1485
1932	....	686	455	1141	208	201	409	1550
1931	....	633	453	1086	172	151	323	1409
1930	...	956	658	1614	249	221	470	2084
1929	....	886	640	1526	221	198	419	1945
1928	...	996	736	1732	262	236	498	2230
1927	....	842	591	1433	209	186	395	1828
1926	....	1048	788	1836	266	249	515	2351

APPENDIX 30.

After Careers of Sanatorium School Children.

		Boys.	Girls	Total.
A.	*Children over* 14 *years of age.*			
1.	Are known to be incapable by reason of mental or physical defect of undertaking employment	6	2	8
2.	Are in attendance at an institution for further education	—	1	1
3.	Are in any other institution	2	6	8
4.	Are unemployed	5	1	6
5.	Number employed in industrial or manual occupations	13	8	21
6.	Number employed in agricultural or rural occupations	4	—	4
7.	Number employed in domestic occupations including those who are helping in the domestic work at home	—	17	17
8.	Number employed in commercial, professional or clerical	7	4	11
9.	Number employed in blind alley or other precarious occupations	15	1	16
B.	*Children under* 14 *years of age.*			
1.	Are attending ordinary schools	78	50	128
2.	Are in any other Institution	13	6	19
C.	*Children removed from the Dispensary Register.*			
1.	Have since died	16	41	57
2.	Recovered	189	156	345
3.	Lost sight of or transferred to other areas	89	67	156
4.	Discharged as non-tuberculous	169	118	287
		606	478	1084

APPENDIX 31.

RETURN RELATING TO ALL PERSONS WHO WERE TREATED AT THE MILL STREET TREATMENT CENTRE FOR VENEREAL DISEASES DURING THE YEAR ENDED 31st DECEMBER, 1935.

	Syphilis.		Soft Chancre.		Gonorrhœa.		Conditions other than Venereal.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
No. of Cases –										
1. Under treatment or observation at the beginning of year ...	229	212	9	1	211	202	21	36	470	451
2. Removed from register during any previous year which returned during the year under report for treatment or observation of same infection	—	—	—	—	—	—	—	—	—	—
3. Dealt with for first time (exclusive of cases under item 4) suffering from :										
Syphilis, primary	56	9	—	—	—	—	—	—	56	9
,, secondary	24	9	—	—	—	—	—	—	24	9
,, latent in 1st year of infection	15	7	—	—	—	—	—	—	15	7
,, all later stages	57	36	—	—	—	—	—	—	57	36
,, congenital	9	15	—	—	—	—	—	—	9	15
Soft Chancre	—	—	83	—	—	—	—	—	83	—
Gonorrhœa, 1st year of infection	—	—	—	—	480	55	—	—	480	55
,, later	—	—	—	—	45	23	—	—	45	23
Conditions other than Venereal	—	—	—	—	—	—	291	82	291	82
4. Dealt with for first time during the year under report known to have received treatment at other centres for the same infection	84	—	3	—	48	—	—	—	135	—
	474	288	95	1	784	280	312	118	1665	687

APPENDIX 31—*Continued.*

	Syphilis.		Soft Chancre.		Gonorrhœa.		Conditions other than Venereal.		Totals.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
No. of cases—*Continued.*										
5. Discharged after completion of treatment and final tests of cure	32	13	19	—	156	38	303	106	510	157
6. Which ceased to attend before completion of treatment and were on first attendance suffering from :										
Syphilis, primary	47	7	—	—	—	—	—	—	47	7
,, secondary	10	7	—	—	—	—	—	—	10	7
,, latent in 1st year of infection	3	1	—	—	—	—	—	—	3	1
,, all later stages	34	29	—	—	—	—	—	—	34	29
,, congenital	6	8	—	—	—	—	—	—	6	8
Soft Chancre	—	—	22	1	—	—	—	—	22	1
Gonorrhœa, 1st year of infection	—	—	—	—	210	28	—	—	210	28
,, later	—	—	—	—	48	19	—	—	48	19
7. Which ceased to attend after completion of treatment but before final tests of cure	3	—	2	—	19	—	—	—	24	—
8. Transferred to other centres or to institutions, or to care of private practitioners	98	42	41	—	175	59	—	—	314	101
9. Remaining under treatment or observation on 31st Dec., 1935....	241	181	11	—	176	136	9	12	437	329
	474	288	95	1	784	280	312	118	1665	687
Number of cases in the following stages of Syphilis, included in item 6, who failed to complete one course of treatment :—										
Syphilis, primary ..	23	3	—	—	—	—	—	—	23	3
,, secondary	2	3	—	—	—	—	—	—	2	3
,, latent in 1st year of infection .. .	3	1	—	—	—	—	—	—	3	1
,, all later stages .	12	13	—	—	—	—	—	—	12	13
,, Congenital	2	3	—	—	—	—	—	—	2	3

APPENDIX 31—*Continued.*

	Syphilis.		Soft Chancre.		Gonorrhœa.		Conditions other than Venereal.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Out-Patient attendances—										
(*a*) For individual attention of the medical officers ...	6120	3258	189	—	5315	3514	1129	176	12753	6948
(*b*) For intermediate treatment, e.g., irrigation, dressings	29	21	60	—	13616	2868	—	—	13705	2889
	6149	3279	249	—	18931	6382	1129	176	26458	9837
In-Patients—										
(*a*) Total number of patients admitted during the year	4	3	2	—	8	8	1	—	15	11
(*b*) Aggregate number of "in-patient days" of treatment given	163	90	105	—	452	486	87	—	807	576

	Under 1 year.		1 and under 5 years.		5 and under 15 years.		15 years and over.		Totals.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Number of cases of Congenital Syphilis in item 3 above, classified according to age periods ...	4	5	—	3	—	2	5	5	9	15

	Microscopical.		Serum Tests.	
	For Spirochetes.	For Gonococci.	Wasserman.	Gonorrhœa.
Pathological Work—				
(*a*) No. of specimens examined at and by the medical officers of the treatment centre	10	13	—	—
(*b*) No. of specimens from patients attending at the centre sent for examination to an approved laboratory	105	1601	1372	6

APPENDIX 31—*Continued.*

STATEMENT SHOWING THE SERVICES RENDERED AT THE TREATMENT CENTRE DURING THE YEAR CLASSIFIED ACCORDING TO THE AREAS IN WHICH THE PATIENTS RESIDED.

NEW CASES.

	Syphilis.	Soft Chancre.	Gonorrhœa.	Conditions other than Venereal.	Totals.
HULL	185	42	429	287	943
East Riding	13	2	30	13	58
West Riding	6	—	2	3	11
Bradford	—	—	1	—	1
Birkenhead	1	—	2	—	3
Birmingham	1	1	—	—	2
Coventry	—	—	1	—	1
Chesterfield	—	—	1	—	1
Cheshire	—	—	—	1	1
Devon	—	—	1	—	1
Durham....	1	1	1	—	3
Derby	—	—	2	—	2
Grimsby	—	—	1	—	1
Darlington	—	—	1	2	3
Ireland	2	—	—	—	2
Kent	—	—	1	1	2
Lancashire	—	—	10	1	11
Lincolnshire	2	—	3	2	7
London	4	2	—	4	10
Leeds	2	1	10	1	14
Liverpool	3	3	4	5	15
Middlesbrough	—	—	1	—	1
Manchester	—	1	3	—	4
Middlesex	—	—	1	—	1
Norwich	—	—	1	—	1
Northants.	—	—	1	—	1
Nottingham	—	—	1	—	1
Northumberland . .	—	—	1	—	1
Newcastle	1	—	—	4	5
Portsmouth	—	1	1	—	2
Orkneys	—	—	1	—	1
Ramsgate	—	—	1	—	1
Shetland	—	—	1	2	3
Suffolk .	—	—	1	—	1
Sunderland	1	—	4	—	5
Salford	—	—	1	—	1
Shields . .	4	—	10	1	15
Scotland . .	5	1	16	9	31
Carried forward ..	231	55	545	336	1167

APPENDIX 31—*Continued.*

	Syphilis.	Soft Chancre.	Gonorrhœa.	Conditions other than Venereal.	Totals.
Brought forward	231	55	545	336	1167
W. Hartlepool	—	—	1	—	1
Wales	3	1	7	1	12
Watford	—	—	1	—	1
Widnes	—	—	1	—	1
York	1	—	—		1
Aden	1	—	—		1
Cyprus	1	1		—	2
China	3	—	2	—	5
Canada	—	—	—	1	1
Denmark	8	3	8	4	23
Egypt	—	—	2	—	2
Finland	12	7	18	7	44
Germany	—	1	4	2	7
Greece	20	7	18	14	59
Hungary	1	1	—	1	3
Iceland	—	—	1	—	1
India	9	5	8	2	24
Italy	2	—	1	—	3
Latvia	3	—	2	—	5
Esthonia	1	—	8	—	9
Holland	2	—	4	1	7
Malta	2	—	—	—	2
Norway	6	1	5	4	16
Poland	1	—	—	—	1
Roumania	—	—	1	—	1
S. Africa	—	—	1	—	1
Sweden	11	3	8	—	22
U.S.A.	2	—	2	—	4
W. Africa	—	—	1	—	1
W. Indies	—	—	1	—	1
Yugo Slavia	1	1	1		3
Totals	321	86	651	373	1431

APPENDIX 32.

CONDITIONS FOR WHICH DOCTORS WERE SUMMONED IN AN EMERGENCY BY MIDWIVES.

		No.
Calls for Medical Aid		910
Calls during Pregnancy		132
Hæmorrhage—		
(1) Before 6th month	15	
(2) Between 6th and 9th month	18	
(3) Occurring at onset of labour	17	
	50	

All the other calls for medical aid during pregnancy were when patient was 7, 8 or 9 months pregnant.

Toxæmia of pregnancy	33	
Minor affections associated with pregnancy	30	
Examination and Premature Labour	4	
Bronchitis	15	
	82	

Calls for medical aid at onset of labour up to end of 3rd stage		388

Most of the calls were for delay during the 2nd stage; Uterine Inertia or no advance of presenting part. Forceps used in most cases.

Delayed labour	175	
Abnormal Presentations—		
(1) Breech	14	
(2) Occipito-Posterior	21	
(3) Prolapsed Cord	4	
(4) Other Malpresentations	5	
	44	
Hæmorrhage during labour	22	
Retained or Adherent Placenta	12	
	34	
Rupture of Perineum	135	

NOTE.—Medical help was summoned in 219 cases of delayed labour and abnormal presentation, *i.e.*, in 8·1% of the 2,709 cases delivered by midwives.

APPENDIX 32—*Continued.*

CONDITIONS FOR WHICH DOCTORS WERE SUMMONED IN AN EMERGENCY BY MIDWIVES—*Continued.*

Puerperium—calls for medical aid		90
Rise of temperature	41	
Weakness	26	
Bronchitis	10	
Minor ailments	13	
	90	
Conditions affecting the infant—calls for aid		309
Prematurity	30	
Eye discharge	164	
Rash	42	
Abnormality	14	
Feebleness of Infant	29	
Minor affections	18	
Stillbirth	3	
	300	

APPENDIX 33.

ANNUAL STATISTICS RELATING TO MATERNITY HOSPITALS AND HOMES FOR THE YEAR 1935.

Name of Institution	HULL MUNICIPAL MATERNITY HOME.
No. of Beds	60 for Maternity Cases. 2 for Nursing Mothers. 12 for Isolation. 30 Cots.
Address	HEDON ROAD, HULL.

No. of cases in the Home on the 1st January, 1935	51
No. of cases admitted during 1935, including 249 in Isolation Block	1435
Average duration of stay	14 days
No. of cases delivered by—	
(*a*) Midwives	843
(*b*) Doctors	90
No. of cases in which medical assistance was sought by the midwife, with reasons for requiring assistance	1072

(*a*) Ante-Natal . . 278

- 132 cases Induced Labour, viz. :—
  - 47 Toxæmias of Pregnancy.
  - 54 Disproportion.
  - 7 Cardiac Disease.
  - 24 Others.
- 22 cases Induction of Abortion, viz. :—
  - 4 Cardiac Disease.
  - 6 Phthisis.
  - 3 Toxæmia of Pregnancy.
  - 2 Carneous Mole.
  - 7 Others.
- 20 Accidental Ante-Partum Hæmorrhage.
- 7 Debility.
- 24 Toxæmias of Pregnancy.
- 12 Pyelitis.
- 7 Cardiac Disease.
- 4 Respiratory Diseases.
- 7 Threatened Abortions.
- 2 Epilepsy.
- 13 Persistent Vomiting.
- 5 Vaginal Discharge.
- 2 Chorea.
- 6 Varicose Veins.
- 15 Others.

(*b*) During Labour 166

- 39 Forceps Deliveries :—
  - 15 Fœtal Distress.
  - 24 Maternal Distress.

APPENDIX 33—*Continued.*

(*b*) During Labour	166—*Continued.*	
		22 Cæsarean Sections :—
		4 After Trial of Labour.
		9 Contracted Pelvis.
		2 Obstructed Labour.
		1 Disproportion.
		4 Heart Disease.
		2 Central Placenta Prævia
		12 Placenta Prævia.
		25 Accidental Ante-Partum Hæmorrhage.
		21 Malpresentation.
		3 Craniotomy.
		27 Prolonged Labour.
		11 Manual Removal of Placenta.
		1 Prolapse of Cord.
		4 Eclampsia.
		1 Obstetric Shock.
(*c*) After Labour ...	317*	252 Laceration of Perineum.
		9 Laceration of the Genital Tract.
		18 Respiratory Diseases.
		101 Mild Pyrexia (not notifiable).
		9 Sub-involution.
		2 Eclampsia.
		16 Thrombo-Phlebitis.
		40 Post-Partum Hæmorrhage.
		3 Pyelitis.
		43 Acute Mastitis.
		10 Retained Products of Conception.
		24 Retroversion of Uterus.
		3 Collapse.
		2 Cardiac failure.
		4 Mental Symptoms.
		4 Blood Transfusions.
		4 Epilepsy.
		6 Others.

* Some patients seen for more than one abnormality.

N.B.—Notified Puerperal Pyrexia and Sepsis cases not included.

(*d*) For Infant	311	73 Prematurity.
		18 Failure to gain weight.
		9 Asphyxia.
		10 Congenital Abnormalities.
		21 Septic Spots.
		10 Enteritis.
		42 Inflammation of Buttocks.
		20 Birth Injuries.
		87 Sticky Eyes.
		2 Broncho Pneumonia.
		1 Atelectasis.
		14 Delayed healing of Umbilicus.
		4 Bleeding in the New-Born.

APPENDIX 33—*Continued.*

No. of cases notified as—		
(*a*) Puerperal Fever	1	
(*b*) Puerperal Pyrexia (*i.e.*, rise of temperature to 100·4 F. for 24 hours, or its recurrence within that period). With result of treatment in each case.	52	42 Affection of Genital Organs. 2 Acute Mastitis. 2 Pyelitis. 3 Respiratory Diseases. 3 Other Causes.
		47 recovered satisfactorily ; 5 died.
No. of cases of Pemphigus Neonatorum	12	
No. of cases notified as Ophthalmia Neonatorum with result of treatment in each case	8	5 cured. 1 died from Prematurity. 1 ,, ,, Gastro Enteritis. 1 ,, ,, Pemphigus Neonatorum.
No. of cases of "Inflammation of Eyes" however slight	87	
No. of infants not entirely breast-fed while in institution, with reason why they were not breast-fed	48	10 Illness of Mother. 32 Insufficiency of Breast Milk. 6 Illness of Baby.
No. of maternal deaths, with causes	16	

2 Generalised Peritonitis.
1 Puerperal Sapræmia. Broncho-Pneumonia. Toxæmia of Pregnancy.
1 Pulmonary Embolism. Placenta Prævia.
1 Cerebral Embolism. Caesarean Section.
1 Eclampsia.
1 Toxæmia of Pregnancy.
1 Obstetric Shock. Ante-Partum Hæmorrhage. Toxæmia of Pregnancy.
1 Post-Partum Hæmorrhage.

Deaths associated with Pregnancy :—
1 Cardiac Failure. Fatty degeneration of the Heart. Cæsarean Section.
1 Uræmia. Pregnancy. Gummata of the Scalp.
1 Uræmia. Chronic Nephritis. Decapsulation of the Kidney.

County Cases.
1 Eclampsia.
2 Generalised Peritonitis.

Deaths associated with Pregnancy :—
1 Cardiac failure. Mitral Stenosis. Aortic Incompetence.

No. of Fœtal Deaths—		
(*a*) Still-born	67	14 Macerated and Premature. 10 Toxæmia of Mother. 5 Placenta Prævia in the Mother. 14 Mother Ante-Partum Hæmorrhage. 4 Prolapse of Cord. 13 Birth Injuries. 5 Malformation of the Child. 2 Cause unknown.
(*b*) Within 10 days of birth and their causes and the result of the post-mortem examination if possible. ..	29	20 Prematurity. 2 Hæmorrhage Neonatorum. 3 Intra-Cranial Hæmorrhage. 2 Asphyxia Pallida. 1 Spina Bifida. 1 Icterus Neonatorum.

APPENDIX 34.

ANALYSIS OF CASES OF PUERPERAL FEVER.

Case No.	Para	Attendant at Confinement.	A.N Care.	Labour.		Treatment.		Result.	Remarks
				Place.	Abnormality.	Home.	Hospital.		
1	2	Doctor	Doctor	Home	Instrumental delivery	—	M.M.H.	Cured	—
2	1	Doctor and Midwife	Nil.	H H for W.	Instrumental delivery	—	H.H. for W.	Cured	
3	2	Doctor	Nil.	Home	Normal	—	M.M H.	Cured	—

APPENDIX 35.

REGISTRATION OF NURSING AND MATERNITY HOMES.

Date Registered.	Address.	Name of Person Registered.	No. of beds.	Nature of case taken.	Remarks.
3rd February, 1927	York Diocesan Maternity Home, Linnæus House, Linnæus Street	Mrs. Agnes E. Lewis	18	Maternity.	—
3rd March, 1927	4 Vermont Street	Mrs. Lily Barnes	2	,,	—
,,	40 Wilberforce Street	Mrs. Jane Bryan	1	,,	No cases taken.
,,	44 Esteourt Street	Mrs. Eleanor M. Ounsworth	1	,,	—
1st March, 1928	117 Newstead Street	Mrs. Martha A. Brewer	1	,,	—
1st July, 1928	St. Margaret's Nursing Home, 98 Beverley Road	Miss Elsie May Brown	7	Medical and Maternity.	—
,,	Ryde Nursing Home, 4 Beech Grove	Miss Emmeline Butterworth	7	Medical and Surgical.	—
,,	St. George's Nursing Home, 208 Anlaby Road	Miss Elizabeth Swallow	10	Medical, Surgical and Maternity.	—
,,	Victoria Nursing Home, 81 Westbourne Avenue	Miss Elizabeth Davies	16	,, ,,	—
,,	26 Morpeth Street	Miss Mary E. Dorman	7	Medical and Maternity.	—
,,	Miss Camm's Nursing Home, 96 and 98 Westbourne Avenue	Misses Wyborn and Sargent	18	Medical, Surgical and Maternity	—
6th August, 1931	91 Albert Avenue	Mrs. Florence Sills	5	,, ,,	—
9th Nov., 1931	Salisbury Home, 66 & 68 Cottingham Road	Miss Selina Sanders	11	Medical, Surgical and Maternity	—
15th April, 1932	*Jalland Nursing Home, 367 Holderness Road	Mrs. Ethel May Wouters	6	Medical, Surgical and Maternity	—
7th July, 1932	St. Mary's Nursing Home, 7 and 9 Southcoates Lane	Mrs. Ethel Dibb	9	Medical and Maternity	—
28th July, 1932	Rokeby Nursing Home, 44 The Boulevard	Mrs. Evelyn Gibbons	6	Medical and Maternity	Closed in Sept., 1935.
16th Dec., 1932	Humber District Nursing Home, 206 Anlaby Road	Miss Lucy Downs	6	Medical	—
1st Sept., 1935	†Jalland Nursing Home, 367 Holderness Road	Miss Lilian Gill and Mrs. Edith Truman	6	Medical, Surgical and Maternity	—

* To August 31st, 1935. † From September 1st, 1935.

APPENDIX 35—*Continued.*

Date Registered.	Address.	Name of Person Registered.	No. of beds.	Nature of case taken.	Remarks.
12th October 1933	" Chandos." Eldon Grove	Miss Ethel Mager ..	8	Medical and Surgical	—
4th Oct., 1934	Hospital for Women, Cottingham Road.	Miss Ethel B. Naylor .	25	Surgical and Maternity	—
16th Nov., 1934	Westbourne House Nursing Home, Princes Avenue	Mrs. Hylda Farthing ...	15	Surgical, Medical and Maternity	—
6th Dec., 1934 .	" Chandos " Annexe, Eldon Grove	Miss Ethel Mager	6	Medical and Maternity	—
6th Feb., 1936	212 Victoria Avenue	Mrs. Evelyn Gibbons ..	5	Medical.	—

APPENDIX 36.

INFANT MORTALITY (NETT DEATHS FROM STATED CAUSES UNDER ONE YEAR OF AGE).

Causes of Death.	1st Day.	2nd Day.	3rd Day.	4th Day.	5th Day.	6th Day.	7th Day.	1st Week.	2nd Week.	3rd Week.	4th Week.	Under 1 Mth.	1/2 Mths.	2/3 Mths.	3/4 Mths.	4/5 Mths.	5/6 Mths.	6/7 Mths.	7/8 Mths.	8/9 Mths.	9/10 Mths.	10/11 Mths.	11/12 Mths.	Total.
All Causes } Certified... ...	52	19	15	12	7	3	3	111	25	16	21	173	46	33	42	22	15	13	15	20	17	11	21	428
All Causes } Uncertified ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Small Pox...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chicken-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	2	1	3	10
Scarlet Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—	2	—	1	—	1	—	2	1	3	1	1	12
Diphtheria and Croup ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Erysipelas...	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1
Tuberculous Meningitis...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	2	1	—	—	5
Abdominal Tuberculosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Tuber. Diseases ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Meningitis (not T.B.) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	1	2	—	1	—	2	8
Convulsions	1	2	—	2	—	—	—	5	—	—	—	5	—	—	—	—	—	—	—	—	—	—	—	5
Laryngitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bronchitis	—	—	—	—	—	1	—	1	1	—	—	2	2	—	1	1	1	—	—	—	2	—	—	9
Pneumonia (all forms) ...	—	—	—	—	—	—	1	1	—	2	2	5	15	6	11	5	1	5	2	8	1	7	11	86
Diarrhœa and Enteritis	—	—	—	—	—	—	—	—	1	6	5	12	5	10	10	7	6	4	6	3	1	—	2	69
Gastritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Syphilis	—	—	—	—	—	—	—	—	1	1	—	2	1	—	—	—	—	—	—	—	—	—	—	3
Rickets	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suffocation (Overlaying)...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Injury at Birth	1	1	—	—		—	—	2	2	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Atelectasis	1	—	1	1		—	—	6	2	—	1	9	—	—	—	—	—	—	—	—	—	—	—	9
Congenital Malformations	2	1	2	2	1	—	1	9	6	—	1	19	3	2	5	2	—	3	—	1	—	1	1	37
Premature Birth... ...	32	11	8	1	1	2	1	62	6	1	1	76	8	2	1	—	—	—	—	—	—	—	—	87
Atrophy, Debility and Marasmus	5	1	2	1	1	—	—	10	2	2	3	17	5	9	5	4	1	—	—	—	—	—	—	41
Other Causes	7	—	2	2	1	—	—	15	4	1	2	22	1	4	1	2	2	—	2			1	1	39
Totals ...	52	19	15	12	7	3	3	111	25	16	21	173	46	33	42	22	15	13	15	20	17	11	21	428

APPENDIX 37.

VISITS PAID BY THE HEALTH VISITORS AND DINING SUPERINTENDENTS.

	1935.	1934.	1933.
Total Visits	100052	100759	95333
Total visits to Children	96401	96010	90098
Visits to Expectant Mothers—			
First visits	401	340	427
Re-visits	369	499	634
Visits to Nursing Mothers	174*	698	1037
Infants under one year—			
First visits	5667	5804	5924
Re-visits	18830	18413	17105
Special visits	183	226	264
Ineffective visits	4583	4837	4495
Infants aged one year—			
Re-visits	14490	14653	13951
Special visits	291	348	335
Ineffective visits	2547	2676	2401
Children 2 to 5 years—			
Effective visits	32769	34887	32355
Ineffective visits	5525	5683	5158
Neglected children (all ages)—			
First visits	—	—	—
Re-visits	7	7	30
Pneumonia Investigations—			
First visits	2	1	1
Re-visits	—	—	1
Inflammation of the eyes—			
First visits	198	156	131
Re-visits	364	303	246
Whooping Cough (all ages)—			
First visits	788	360	422
Re-visits	69	24	9
Chicken-pox—			
First visits	50	11	11
Re-visits	—	—	3
Measles (all ages)—			
First visits	2330	874	1552
Re-visits	100	31	30
Diarrhœa—			
First visits	86	66	87
Re-visits		3	12

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* These visits are done by the Dining Centre Superintendent who is not a Health Visitor. The remaining Dining Superintendents are now Health Visitors, and their figures appear under the Health Visitors list.

APPENDIX 37—*Continued.*

	1935.	1934.	1933.
Pemphigus Neonatorum—			
First visits	‡72	*52	†57
Re-visits	139	118	118
Mumps—			
First visits	197	654	299
Re-visits	3	18	—
Anterior Poliomyelitis—			
First visits	3	5	19
Re-visits	—	11	14
Scabies and Verminous Children—			
First visits	1	—	—
Re-visits		7	2
Visits *re* financial circumstances	276	350	95
Investigations *re* Medical Help Forms	729	709	621
,, Puerperal Pyrexia	37	21	35
,, Puerperal Fever	3	12	7
,, Still-births	158	180	223
,, Deaths from Tuberculosis	14	13	27
,, Maternal deaths	19	26	45
,, Infant deaths	182	161	203
Visits to Midwives	264	283	237
Nurse Children—			
First visits	53	61	69
Re-visits	611	787	772
Cards of children entered School despatched to School Medical Officer	2109	2145	2102
Miscellaneous Visits (Removals, Home Helps, etc.)	5359	5967	5887

	1935.	1934.	1933.
No. of attendances at Clinic Sessions	4771	4710	4646

MUNICIPAL MIDWIVES' VISITS.

	1935.	1934.	1933.
Visits to Expectant Mothers	2281	2080	1966
Total visits to Expectant Mothers by Municipal Midwives, Health Visitors and Dining Superintendents	3051	2919	3027

‡ Only 30 cases were notified.

* Only 26 cases were notified.

† Only 35 cases were notified.

APPENDIX 37—*Continued.*

The following visits have been paid by Probationer Health Visitors during the year April 1st, 1935, to March 31st, 1936.

Total visits	8711
Total visits to Children	8653
Visits to Expectant Mothers—	
First Visits	4
Re-visits	
Visits to Nursing Mothers	—
Infants under one year—	
First visits	562
Re-visits	1038
Special visits	2
Ineffective visits	467
Infants aged one year—	
Re-visits	1060
Special visit	1
Ineffective visits	426
Children 2 to 5 years—	
Effective visits	2754
Ineffective visits	942
Neglected children (all ages)—	
First visits	—
Re-visits	—
Pneumonia Investigations—	
First visits	—
Re-visits....	—
Inflammation of the eyes—	
First visits	2
Re-visits	13
Whooping Cough (all ages)—	
First visits	186
Re-visits	1
Chicken-pox—	
First visits	14
Re-visits	—
Measles (all ages)—	
First visits	689
Re-visits	5

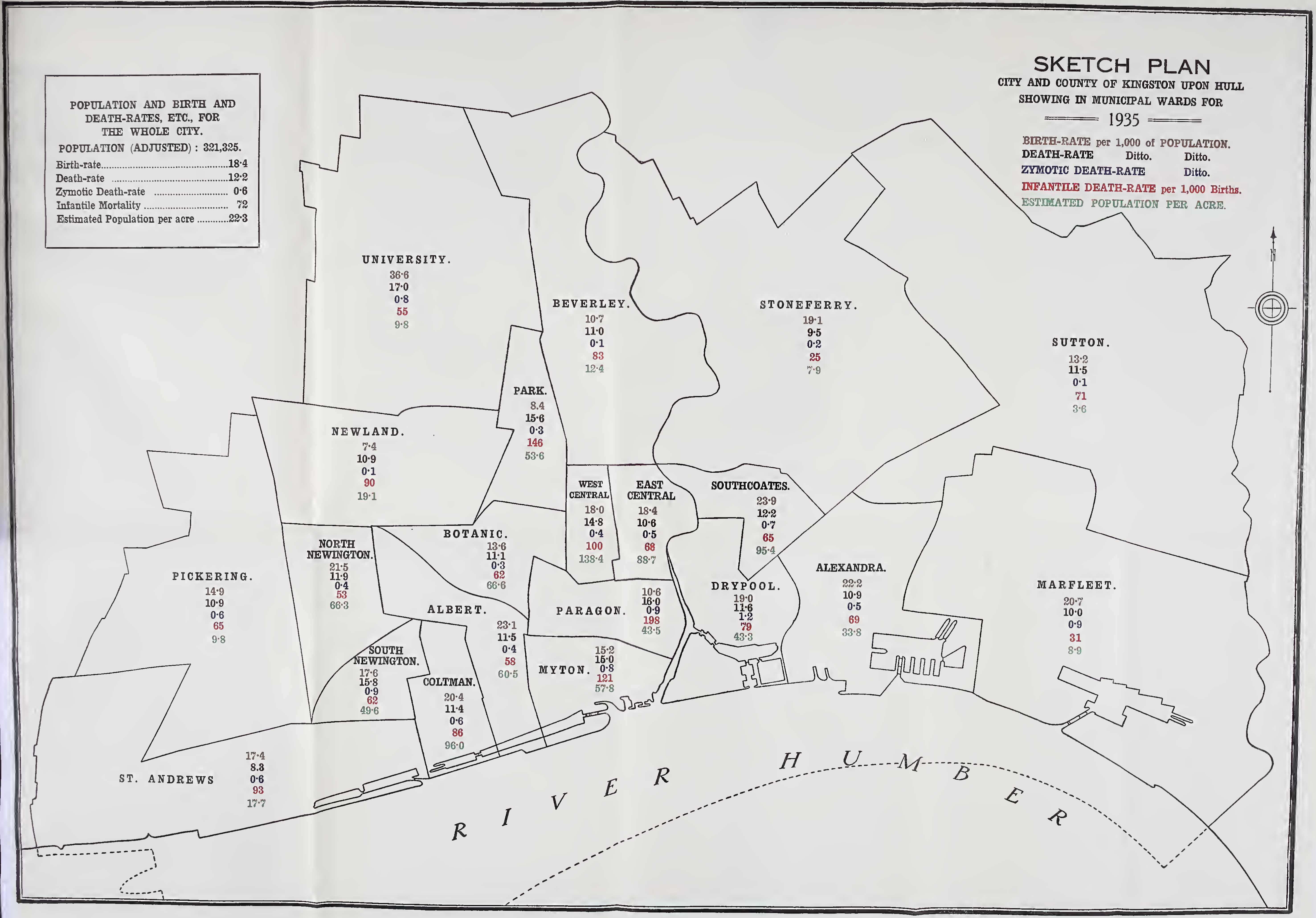
Diarrhœa—	
First visits	13
Re-visits	—
Pemphigus Neonatorum—	
First visits	2
Re-visits	—
Mumps—	
First visits	28
Re-visits....	—
Anterior Poliomyelitis—	
First visits	—
Re-visits....	—
Scabies and Verminous Children—	
First visits	—
Re-visits	—
Visits *re* financial circumstances	12
Investigations re Medical Help Forms	4
,, Puerperal Pyrexia	—
,, Puerperal Fever	—
,, Still-births	—
,, Deaths from Tuberculosis	7
,, Maternal Deaths	—
,, Infant Deaths	4
Nurse Children—	
First visits	—
Re-visits	6
Cards of children entered School despatched to School Medical Officer	23
Miscellaneous visits (Removals, Home Helps, etc.)	446

No. of attendances at Clinic Sessions 1302

APPENDIX 38.

FOOD DISTRIBUTION DEPOTS (M. & C.W.)
SUMMARY OF ISSUES FOR THE YEAR ENDED 31st DECEMBER, 1935.

	Hanover Square Depot.			Coltman Street Depot			Total Issues.	Receipts from Sales.						Value of Free Issues.			Value of Total Issues.		
								At Cost Price.			At Half Price.								
	Sold.	Half Price.	Free.	Sold.	Half Price.	Free.		£	s	d	£	s	d	£	s	d	£	s.	d
Dried Milks :—																			
Cow and Gate, No. 1	1071	7	456	1968	6	450	3958	202	12	0	0	8	8	60	8	0	263	8	8
Do. No. 2	10558	156	6093	9555	67	3332	29761	1508	9	6	8	7	3	706	17	6	2223	14	3
Ostermilk, No. 1	1077	8	453	924	3	462	2927	159	1	6	0	8	3	68	12	6	219	2	3
Do. No. 2	6524	84	6081	2729	14	2386	17818	693	19	6	3	13	6	635	0	6	1332	13	6
Glaxo	1702	45	5086	1168	20	2025	10046	215	5	0	2	8	9	533	6	6	751	0	3
Ambrosia	4769	121	13237	4867	122	7040	30156	722	14	0	9	2	3	1520	15	6	2252	11	9
Lactogen	169	5	97	91	—		362	19	10	0	0	3	9	7	5	6	26	19	3
Allergilac	91		37	532		113	773	46	14	6				11	5	0	57	19	6
Milk Powder	6	5	2131	13	4	989	3148	1	4	0	0	6	9	117	0	0	118	10	9
Virol	2420	13	1802	2703	24	1708	8670	170	15	4	0	12	4	117	0	0	288	7	8
Virolax	276	1	78	236	2	31	624	21	6	8	0	1	3	4	10	10	25	18	9
Malt Extract	123	—	188	200	2	138	651	8	14	11½	0	0	7	8	16	7	17	12	1½
Malt and Iron	3766	14	4188	2860	3	1491	12322	138	0	10	0	4	3	118	6	3	256	11	4
Cod Liver Oil, 5 ozs.	2024	24	3303	685	2	761	6799	56	8	9	0	6	6	84	13	4	141	8	7
Cod Liver Oil Emulsion, 5 ozs.	5327	79	9041	5334	34	4659	24474	222	2	1	1	8	3	285	8	4	508	18	8
Numol	140	—	27	18	—	18	203	4	18	9		—		1	8	1½	6	6	10½
Medicinal Paraffin	168	2	304	104	—	46	624	11	18	0	0	1	0	15	6	3	27	5	3
Ostelin	1465	8	1758	649	5	590	4475	48	8	11	0	3	3	53	16	2	102	8	4
Year, 1935	41676	572	54360	34636	308	26239	157791	4243	4	3½	27	16	7	4349	16	10½	8620	17	9
Year, 1934	37404	576	41260	30507	321	21248	131316	3690	8	10½	29	2	6	3443	15	2½	7192	9	1
Year, 1933	33281	296	28920	28713	365	18412	109987	3254	1	0½	20	7	11	2662	4	3½	5957	1	2
Year, 1932	34632	395	30844	31140	607	19321	116939	3547	14	0½	32	0	5	2871	6	3	6483	1	1½



SKETCH PLAN

CITY AND COUNTY OF KINGSTON UPON HULL
SHOWING IN MUNICIPAL WARDS FOR
1935

BIRTH-RATE per 1,000 of POPULATION.
DEATH-RATE Ditto. Ditto.
ZYMOTIC DEATH-RATE Ditto.
INFANTILE DEATH-RATE per 1,000 Births.
ESTIMATED POPULATION PER ACRE.

POPULATION AND BIRTH AND DEATH-RATES, ETC., FOR THE WHOLE CITY.

POPULATION (ADJUSTED) : 321,325.

Birth-rate	18·4
Death-rate	12·2
Zymotic Death-rate	0·6
Infantile Mortality	72
Estimated Population per acre	22·3

SCHOOL MEDICAL SERVICE.

REPORT OF THE
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1935.

HULL EDUCATION COMMITTEE.

Chairman—
Councillor D. C. Lister, J.P.

Deputy-Chairman—
Councillor S. H. Smith, M.A. (Oxon.)

Elementary Education Sub-Committee.

Chairman—
Councillor D. C. Lister, J.P.

Deputy-Chairman—
Councillor (Mrs.) L. Alderson.

Alderman J. Allan, J.P.
Alderman F. Holmes.
Alderman J. L. Schultz.
Alderman H. Webster.
Councillor A. Akester.
Councillor G. M. Coult.
Councillor J. G. Hewett, J.P.
Councillor H. Kneeshaw.
Councillor J. Lawson.
Councillor G. W. Mayfield.
Councillor L. Science.
Councillor (Mrs.) A. B. Slimming.
Councillor S. H. Smith, M.A. (Oxon.).
Councillor Helen Theilmann, J.P., M.B.E.
W. Duggleby, Esq.
Mrs. L. A. Holmes.

Director of Education—
R. C. Moore, M.A., M.Sc., M.Ed.

STAFF OF SCHOOL MEDICAL DEPARTMENT
at 31st December, 1935.

Medical Officer of Health and School Medical Officer :
NICOLAS GEBBIE, M.D., D.P.M., D.P.H.

Senior Assistant Medical Officer of Health (School Medical Service):
J. MORRISON, M.C., M.A., M.D., D.P.H.

Medical Officers regularly employed in Department :
Assistant Medical Officers of Health :
LILIAS B. HARDIE, M.D.
ELIZABETH J. FINDLAY, M.D., D.P.H.
ALICE STEVEN, M.B., Ch.B.
H. M. COHEN, M.B., Ch.B., D.P.H. (Resigned 30th November, 1935).
R. C. HOLDERNESS, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.
DORIS G. SHARVELLE, M.R.C.S., L.R.C.P., D.P.H.
W. F. LYLE, M.D., B.Sc., D.P.H.

Specialist Officers :
Ophthalmic Section : W. BAINBRIDGE, M.B., Ch.B., D.P.H.
Orthopædic Section : R. BERTRAM BLAIR, M.B., F.R.C.S. (Edin.).
J. F. GILL, B.Sc., M.B., Ch.B., F.R.C.S. (Eng.).
Aural Section : T. RITCHIE RODGER, M.D., F.R.C.S. (Edin.).
R. R. SIMPSON, M.B., Ch.B., F.R.C.S. (Edin.).
X-Ray Section : J. E. BANNEN, M.B., Ch.B., D.M.R.E.
R. H. HERMON, M.B., Ch.B., D.M.R.E.
Rheumatism and Heart Section : D. C. MUIR, M.D., F.R.C.P.

Dental Officers :
W. STANLEY MILLER, L.D.S.
ALLAN A. JONES, L.D.S.
FREDERICK WILLIS, D.C.M., L.D.S.
T. H. ROBERTS, L.D.S.
D. GIBSON, L.D.S.
J. R. WATSON, L.D.S.
C. A. TINN, L.D.S.

Nursing Staff :
Miss D. A. COEN.
Miss F. J. E. KAY.
Miss L. LONG.
Miss L. C. BOLTON.
Mrs. M. A. GRASSBY.
Miss E. LANGDALE.
Miss B. PETERS.
Miss G. B. BEAMER.
Miss A. M. BROWN.
Miss D. E. PENNY.
Miss M. HUDSON.
Miss A. KIND.
Miss E. ROBERTS.
Miss J. L. A. BLOOMFIELD.

Orthopædic Clinic Staff :
Miss I. M. MATSON.
Miss N. E. LEWIS.

Park Avenue School Staff :
Miss C. A. WALKER, *Superintendent.*
Miss E. VERNON.
Miss E. M. BRISTOL.

Dental Attendants :
Miss C. E. SMITH.
Miss H. ROBINSON.
Mrs. E. M. SHANN.
Miss D. A. MILLBANK.
Miss S. E. O'BYRNE.
Miss N. HAINES.
Miss O. M. BOYES.

Special Visitors :

Dental :	Cleanliness :
Miss A. M. FOSTER.	Miss H. LEADBETTER.
Miss L. SHANNON.	Mrs. L. M. SPINK.

Clerical Staff :
W. H. NELSON, *Senior Clerk, School Medical Department.*
Miss M. M. HUNT.
Miss A. B. DRAKE.
Miss A. M. ROBINSON.
Miss M. C. HALL.
Miss H. M. COLE.
Mr. P. BUCK.
Miss K. LITTEN.
Miss E. H. MARTIN.
Miss E. LONCASTER.
Miss O. BAXTER.
Miss F. M. GROVE.
Miss G. M. ROEDER.

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SUMMARY OF WORK.

	1935.	1934.
Medical Officers at Schools—		
Routine inspections at Elementary and Special Schools	13,164	13,913
Routine inspections at Secondary Schools	3,292	3,190
Special inspections at Elementary and Special Schools	1,873	4 011
Special inspections at Secondary Schools	13	8
Re-inspections at Elementary and Special Schools	10,034	4,758
Re-inspections at Secondary Schools	188	143
Medical Officers at Clinics—		
Inspections at Clinics	21,679	21,377
Re-inspections at Clinics (including Specialist Clinics)	36,052	34,374
Inspections under Employment of Children Bye-laws	612	557
Miscellaneous	152	142
Dental Officers—		
Routine inspections at Schools	49 182	47,713
Special inspections	1,816	1,674
Attendances for treatment	30,992	28,530
Nurses, Assistant Visitors, &c.—		
Visits to Schools	1,963	2,018
Examinations (including cleanliness inspections) in Schools	127,950	147,812
Visits to homes	17,128	16,754
Treatments of minor ailments in Clinics	168,197	168,092
Treatments of minor ailments at Special Schools	12,346	12,168
Treatments of orthopædic defects in Clinics	7,748	7,281
Treatments of orthopædic defects at Special Schools	25,118	20,218
School Clinics—		
Grand total of inspections and treatments, as detailed above	265,342	260,353

CITY OF HULL.

GENERAL INFORMATION.

	1935.	1934.
opulation (estimated)	319,710	319,600
ementary Schools (including Special Schools)—		
Number of Schools	82	80
Number of Departments	189	188
Number on Rolls	48 098	48,721
Average Attendance	43,789	45,079
hools for Higher Education—		
Boys	4	4
Girls	3	3
Mixed	4	4
Number on Rolls	4 835	4,601

	1934-35	1933-34.
ost of School Medical Service—		
Total Cost	£17 687	£16,134
Government Grant	8 843	8 067
Cost to Rates	8 844	8,067
Cost in terms of a Penny Rate	1 383d	1 269d.

To the Chairman and Members
of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you the report upon the work of the School Medical Department for the year ended 31st December, 1935.

The arrangements for medical and dental inspection and treatment of school children in Hull are very comprehensive, and the work of the Department has been carried out in a highly satisfactory manner by all the members of the staff under the able supervision of Dr. J. Morrison.

The measures undertaken by the School Medical Department during the year under review to safeguard the health of our school population have been similar in scope to those in operation in previous years. During 1935, the staff of the School Dental Department was strengthened by the appointment of an additional dental officer.

In accordance with my previous practice, I have included in the appendices to this report original articles by members of the staff upon special investigations they have undertaken :—

(A) " Nutrition," by J. Morrison, M.A., M.D., D.P.H.

(B) " An Investigation into some of the Problems of Mental Deficiency," by H. M. Cohen, M.B., Ch.B., D.P.H.

(C) " A Note on Rheumatic Heart Disease and Congenital Heart Defect," by D. C. Muir, M.D., F.R.C.P., and J. W. Brown, M.D., M.R.C.P.

(D) " Non-acceptance of Dental Treatment," by D. Gibson, L.D.S.

These papers are of general and scientific interest and will be carefully perused and much appreciated by School Medical and School Dental Officers in Hull and elsewhere.

My thanks are again tendered to all the members of the staff who have, by their votion to duty, made possible the successful results recorded in these pages ; the Chairman and Members of the Elementary Education Sub-Committee for eir continued interest and valuable help in all matters appertaining to the work the School Medical Department ; to the Director of Education and his staff r their helpful co-operation ; to the teachers for their willing response to every ll for assistance, and to the parents of the children for their support.

I am,

Ladies and Gentlemen,

Your obedient Servant,

NICOLAS GEBBIE,
School Medical Officer.

ealth Department,
Guildhall, Hull.

pril, 1936.

The subject matter of this Report is set out under the headings recommended by the Board of Education.

I.—STAFF.

1. Details of the staff employed in the School Medical Department are printed on page 253. It should be noted as regards medical officers that all of these officers, although in the whole-time employment of the Corporation, are not employed for the whole of their time on school medical work. During the year an additional assistant medical officer mainly for employment in the School Medical Department was appointed. The position in December, 1935, was that the senior assistant and four assistant medical officers were employed for the greater part of their time on school medical work and the other assistant medical officers gave from one to three sessions per week to that work. The total number of medical officers' sessions utilised in the department was equivalent to the services of $5\frac{3}{11}$ whole-time officers.

During the year an additional dental officer was appointed. One nurse, one dental attendant, and one clerk were also added to the staff. On the resignation of the remaining attendant employed for medical inspection purposes, no fresh appointment in this grade was made.

II.—CO-ORDINATION.

2. A very comprehensive scheme providing for the inter-availability of clinic services has been in existence for some years. Very few of the general public appreciate the fact that in Hull the staff of the school medical department undertakes in clinics a vast amount of medical work in respect of several classes of the general population other than school children. The age range of patients dealt with in school clinics ranges from a few weeks to approximately 80 years! Yet there are many people who think that the school medical department is concerned only with the examination of children at certain stages of their school life. The eye work undertaken in special ophthalmic clinics occupies approximately the equivalent of the time of one whole-time medical officer in addition to the part-time employment of a specialist; the amount of time given by dental officers to non-school cases is roughly equivalent to the whole-time employment of one dentist.

Two tables are printed to show the extent to which certain facilities for co-ordination were utilised during the year.

SERVICES PROVIDED BY THE SCHOOL MEDICAL DEPARTMENT.

SERVICE.	Children under 5 years.		Nursing and Expectant Mothers.		Tuberculosis Dept. Patients.		Other Cases.		Totals.	
	Cases.	Attend.	Cases.	Attend.	Cases.	Attend.	Cases.	Attend	Cases.	Attend.
Minor Ailments Treatment ...	957	9972	—	—	—	—	3	19	960	9991
Dental Treatment	184	642	619	2923	*13	*68	363	1119	1179	5052
Orthopædic Clinic	46	943	—	—	6	57	30	751	82	1751
Ophthalmic Clinic	161	287	—	—	—	—	233	131	394	718
Aural Clinics	71	154	—	—	—	—	—	—	71	154
X-Ray Treatment	4	4	—	—	—	—	5	8	9	12
Rheumatism and Heart Clinic	15	29	—	—	—	—	—	—	15	29
Plaster Splints	2	3	—	—	3	4	—	—	5	7

* At School Clinics only. In addition, treatments were carried out by Dental Officers at the Tuberculosis Sanatorium during 30 half days.

Services provided for School Medical Department.

Service.	Cases.	Attendances.
Artificial Light Treatment :—		
(*a*) At West Hull Clinic (M. & C.W.)	16	447
(*b*) At East Hull Combined Clinic...	12	199
Orthopædic Clinic (East Hull)	33	6589
do. (West Hull)	6	17
X-Ray Examinations	156	162
Treatment of Scabies	473	3002
Treatment of Uncleanliness	—	—
Examination of Throat Swabs	1016	1050

III.—SCHOOL HYGIENE.

3. The systematic surveys by medical officers of the hygienic conditions of school premises which were discontinued some years ago, owing to circumstances connected with the economic situation, have not yet been resumed.

A list of improvements in school premises is printed below.

Replacement of Trough Closets by Pedestal W.C.'s :—Three Schools.
Installation of Electric Heating Apparatus :—Two Departments.
Improvements to Natural Ventilation :—Six Departments.
Erection of Pavilions on Playing Fields :—Three Fields.
Removal of Risers in Classrooms :—Six Departments.
Improvement of Natural Lighting :—One School.
Improvement of Gas Lighting :—Eighteen Departments.
Lighting of Emergency Staircase :—One School.
Erection of Emergency Staircase :—One School.
Provision of Emergency Exit :—One School.
Provision of Indoor Lavatories :—Three Departments.

IV.—MEDICAL INSPECTION.

4. The arrangements for routine medical inspection remain as in previous years ; 479 visits were made by medical officers to elementary schools for the purpose of carrying out such inspections. Figures relating to medical inspection are printed in Table I, page 288. Recently the question has been raised in the country generally as to whether the system of routine age-group inspections should be discontinued and a less routine and formal inspection substituted with the object of selecting children irrespective of age who appear to require medical observation or treatment. There is no doubt that with the enormous development of clinic services in urban areas such as Hull, inspection at specific ages during school life is not nearly so important as it was in the earlier days of the school medical service. With the facilities provided in Hull any child can be inspected at any time in his school career on the initiative of the parent or of the teacher.

ie extent, however, to which these facilities are utilised varies greatly with the pe of school and with the attitude of the head teacher, and therefore it appears at there is still an important part to be played by routine inspection. The ures for 1935 show a decrease on those for 1934. The reasons for this reduction various, but the chief are the pressure of other duties; such as ophthalmic ork and work in connection with the scheme for the provision of milk. Practically ot the "special" inspections noted in the table were undertaken at clinics and t in schools.

V. FINDINGS OF MEDICAL INSPECTION.

5. Detailed figures relating to certain defects *found during the year* are printed Table II, page 289.

The percentage of defects found in comparison with the percentages in the ole country and in London are shown below.

Routine Medical Inspections.

Percentage of children examined found to have defects requiring treatment cluding dental disease and uncleanliness) :—

Prescribed Groups.	Hull.		England and Wales, including London.	London.
	1935.	1934.	1934.	1934.
Entrants	16·9	17·4	16·4	14·4
Second Age Group	16·0	15·0	18·5	16·3
Third Age Group	12·4	12·7	17·1	16·4
All Groups	15·2	15·1	17·3	15·6

Nutrition.

6. The question of nutrition has received special attention this year, and is alt with in an Appendix, page 295.

Uncleanliness.

7. Cleanliness inspections by nurses are undertaken in accordance with a finite scheme. Figures relating to these inspections are shown below. The ndard adopted for marking children unclean is a high one, but even allowing

for this fact there is some justification for the comment that it is disappointing to find so many cases of uncleanliness, especially in view of the improvements in housing facilities during the last few years. A scrutiny of the records shows that the difficulty lies in the persistent uncleanliness in a number of families.

Cleanliness Inspections—Total—109,080.

Findings.	Individual Children.	Percentage of School Roll.
Nits present, but no vermin seen	5163	10·7
Vermin present	626	1·3
Dirty but no nits or vermin	245	0·5
Total	6034	12·5

Tuberculosis.

8. In practically every instance the cases of Tuberculosis recorded in Table II have been diagnosed by the Tuberculosis Department.

The findings of the Tuberculosis Department in cases referred by the School Medical Department are shown below.

Number of children who attended the Dispensaries	72
Cases of definite Pulmonary Tuberculosis	5
Cases of definite Non-Pulmonary Tuberculosis	11
Suspected cases to be kept under observation	7
Cases not suffering from Tuberculosis	49

Dental Defects.

9. The findings at routine inspections by dental officers are printed in Table V, page 293, and are referred to on page 267.

VI.—FOLLOWING UP.

10. The arrangements for following up remain unaltered.

11. The nursing staff made 12,433 visits to homes in connection with the following up of defects found at medical inspection.

12. Under the cleanliness scheme, 109,080 examinations were made and mes were visited on 1,011 occasions.

13. During the year no legal proceedings were taken at the instance of the lucation Authority in respect of uncleanliness or neglect to provide medical l. The assistance of the National Society for the Prevention of Cruelty to ildren was enlisted in a number of cases and the intervention of the Society's spectors invariably resulted in a speedy amelioration of conditions.

VII. ARRANGEMENTS FOR TREATMENT.

14. In our school clinics inspection as well as treatment work is undertaken. is convenient, however, to deal with all the work done in school clinics in this tion of the Report.

Certain details of the work in connection with school children are printed in bles IV and V, pages 292 and 293. In addition two tables printed below strate the amount of work done in respect of non-school as well as of school ses. Reference should also be made to the table printed on page 259.

15. New developments in the provision of clinic facilities in the North Hull a took place in 1935. The position is that with the very rapid development of North Hull Housing Estate, which is situated a long distance from the older nics, it has been found necessary to provide special clinic facilities on the site. clinic was established at Hall Road School some years ago, but it was found ring 1935, as the estate developed in the Endike Lane West area, that the sition of the clinic in Hall Road was not convenient for the whole estate. wards the end of the year a clinic was established in the Endike Lane West hool and within a week of its opening it was obvious that it met a demand. the table below, both Hall Road and Endike Lane West Clinics are included in title North Hull Clinics. At these two small clinics, only ordinary inspection l minor ailments treatment work are undertaken. Considerable progress has en made with the building of the new North Hull combined clinic and this will opened early in 1936. In this clinic facilities will be provided for special types work—dental, ophthalmic, orthopædic, etc.

WORK DONE IN SCHOOL CLINICS, 1935.

WORK UNDERTAKEN.	CENTRAL CLINIC.		WEST CLINIC.		BLENKIN ST. CLINIC.		MORRILL ST. CLINIC.		NORTH HULL CLINICS.		TOTALS.					
											School Cases.		Non-School Cases.		All Cases.	
	Cases.	Attend.	Cases.	Attend.	Cases.	Attend.	Cases.	Attend.	Cases.	Attend.	Cases.	Attend.	Cases.	Attend.	Cases.	Attend.
Inspection Work :—																
1. Minor Ailments and General ...	5334	14980	5410	12366	2793	7617	3091	8435	1744	4110	17431	44459	941	3049	18372	47508
2. Orthopædic	179	974	—	—	—	—	—	—	—	—	97	591	82	383	179	974
3. Refractions	1097	1544	750	1034	—	—	854	1211	—	—	2307	3071	394	718	2701	3789
4. Aural	237	559	221	640	—	—	208	633	—	—	595	1678	71	154	666	1832
5. X-Rays	41	66	—	—	—	—	—	—	—	—	32	54	9	12	41	66
6. Rheumatism and Heart	84	312	—	—	—	—	37	147	—	—	106	430	15	29	121	459
7. Employment Cases	188	188	216	216	35	35	127	127	46	46	612	612	—	—	612	612
8. Mental Deficiency	44	88	21	62	4	4	21	43	4	5	94	202	—	—	94	202
9. Nutrition	487	547	405	475	243	282	288	312	207	235	1630	1851	—	—	1630	1851
10. Miscellaneous ...	92	111	25	25	7	7	8	8	1	1	11	11	122	141	133	152
Treatment Work :—																
1. Minor Ailments (including Aural)	4209	51827	3716	38699	2186	30456	2322	32713	1457	14502	12931	158206	959	9991	13890	168197
2. Dental	6840	12007	5678	9957	—	—	6085	8938	—	—	17124	25850	1479	5052	18603	30902
3. Orthopædic	134	7748	—	—	—	—	—	—	—	—	112	6380	22	1368	134	7748
4. X-Rays	41	41	—	—	—	—	—	—	—	—	32	32	9	9	41	41

School Clinics, 1931-1935.

Number of Cases.

Work Undertaken.	1931.	1932.	1933.	1934	1935.
nor Ailments—Inspection Clinics :—					
1. Minor Ailments treated	16125	15329	14358	14126	13800
2. Defects inspected but not treated	4137	4692	1547	1535	1482
3. Examinations under Employment Byelaws ...	452	483	537	557	612
4. Miscellaneous Inspections	150	115	83	140	133
fraction Clinics	1370	1846	1921	2314	2701
ntal Clinics—Treatment only	18626	19103	18066	18394	18603
thopaedic Clinics	140	159	174	195	179
rmal Examinations for Mental Deficiency ...	187	138	156	153	91
ral Clinic Inspections	794	608	583	852	666
Ray Treatment	80	49	32	31	41
eumatism and Heart Clinic	216	242	161	159	121
trition Clinic		—	—	771	1630

16. Special attention is drawn to the figures set out in the table on page 259, ating to the numbers of non-school cases treated at school clinics. Payment in spect of these cases is made by the appropriate committees to the Education mmittee. It is as well, however, to point out, in these days when criticism of penditure on school medical departments is not unknown, that much of the work ne in school clinics by members of the staff of the school medical department undertaken on behalf of classes of the population other than school children.

17. Notes on various activities of the clinics are appended.

Minor Ailments.

18. There is nothing noteworthy.

Visual Defects.

19. The figures in Table IV, Group II, refer solely to children attending mentary schools. The total amount of work done at special ophthalmic clinics shown below.

Ophthalmic Clinic.

	Cases.	Attendances.	Spectacles Prescribed.
Elementary School Children	2028	2700	1514
Special School Children	61	85	46
Secondary School Pupils	218	286	168
Children's Homes cases	10	14	9
Children under 5 years	161	287	107
Blind Trainees	6	6	—
Out Relief cases	217	111	197
Totals	2701	3789	2041

20. Reference was made in last year's Report to the large increase in this pe of work during 1934. During 1935, a further large increase has to be noted. is fact is important because, owing to the nature of these cases, only a small

number can be dealt with in a clinic session. The special reasons for the increasing demand for ophthalmic clinic work were dealt with in last year's Report and it is only desired to point out the rapid increase in Public Assistance Out-Relief cases from 102 attendances in 1931 to 266 in 1934 and 411 in 1935.

21. The types of case dealt with at the ophthalmic clinics are shown in the appended summary. From this summary all adult cases are omitted.

Summary of Conditions Found.

Condition.	Number of Examples.
Emmetropia	104
Hypermetropia	211
Hypermetropic Astigmatism	635
Myopia	234
Myopic Astigmatism	278
Mixed Astigmatism	171
Convergent Strabismus	405
Divergent Strabismus	22
Corneal Nebulæ, Etc.	18
Cataracts	12
Retinitis	2
Nystagmus	9
Interstitial Keratitis	2
Optic Atrophy	3
Congenital Defects other than Cataracts	7
Other Conditions	19
Total	2132

22. The scheme for the provision of spectacles continues to operate most successfully. Under this scheme—

1. One thousand five hundred and one pairs of spectacles were supplied on new prescriptions issued at our ophthalmic clinics.
2. Seventy-three pairs of spectacles were supplied on renewal of previous prescriptions.
3. Three pairs of spectacles were supplied on prescriptions issued elsewhere than at school clinics.
4. One hundred and seventy minor repairs were undertaken.

In no case did the Education Committee pay any portion of the cost.

23. It is of special interest to note that two types of spectacle frames are ailable under the Contract. Parents are offered the choice of saddle-bridge pe or pad bridge type frames. It is gratifying to note that although the price the pad-bridge type is higher 1,656 parents elected to provide this frame while ly 81 chose the less efficient saddle-bridge type.

Nose, Throat and Ear Defects.

24. A table is printed to show the amount of work undertaken at the special ral clinics.

Aural Clinic, 1935.

Disease.	Cases.	Attendances.	Operation Required.	Operation Performed.
Otitis Media	227	767	173	97
Other Defects	368	911	321	182
Totals	595	1678	494	279

25. The Education Committee do not make any direct provision for operative atment of tonsils and adenoids. The figures printed in Table IV, Group III, resent only a fraction of the total number of operations carried out in the city ; s not possible to secure reliable information as to the number of operations lertaken privately or in institutions.

Dental Defects.

26. Statistics relating to work done by dental officers among school children printed in Table V, page 293. In addition to the work summarised in this le an increasing amount of work is undertaken in connection with patients in erent categories and of all ages referred by other departments of the Health vice. A summary of this work is appended. The summary does not include k done by a dental officer who visits the Cottingham Tuberculosis Sanatorium e every week.

Dental Treatment of Non-School Cases.

	Children under 5 years.	Expectant and Nursing Mothers.	Tuberculous Cases.*	Children's Homes Cases.	Out Relief Cases
r dealt with	484	619	13	81	282
ances	642	2923	68	115	1304
ions —					
emporary Teeth ...	1037	—	2	65	—
ermanent Teeth ...	—	5025	104	41	1603
emporary Teeth ...	14	—	—	—	—
rmanent Teeth ...	—	102	—	37	4
Operations	284	355	8	22	209
stration of General æsthetics	200	803	7	3	119

* Cases seen at Clinics only ; cases seen at Sanatorium not included.

27. In order to illustrate the increased scope of activities under the dental scheme during the last ten years two further tables are given.

Routine Dental Inspections.

Age Groups.	1926.	1929.	1932.	1935.
5 years and under ...	—	4018	4980	5664
6 ,, ...	3474	4191	4705	5032
7 ,, ...	3405	4320	4879	5471
8 ,, ...	2468	5370	5173	5678
9 ,, ...	265	4445	5015	5360
10 ,, ...	—	2288	5488	5622
11 ,, ...	—	1346	5761	5362
12 ,, ...	—	1296	4938	5203
13 ,, ...	—	1554	3610	5059
14 ,, ...	—	23	380	638
15 ,, ...	—	3	15	93
16 ,, ...	—	—	—	—
Totals	9612	28854	44944	49182
Average per session ...	53·4	108·4	125	123

Dental Treatment.

	1926.	1929.		1932.		1935.	
		School Children.	All Cases.	School Children.	All Cases.	School Children.	All Cases.
Cases treated	9195	12438	12930	17853	19103	17124	18603
Attendances	11486	17649	18635	25199	28743	25850	30902
Fillings	2156	3306	3340	6238	6558	5131	5288
Extractions	22818	26870	29518	33292	39708	28885	36762
Other Operations	660	879	973	3609	4036	5245	6123
Average attendance per session	10·5	11·9	12·5	10·0	11·4	9·8	11·8

28. It is hoped that during 1936 it will be possible to introduce a scheme for the routine dental inspection and treatment of pupils attending various schools for higher education. Hitherto treatment has been provided on application by parents who were required to demonstrate their inability to provide private treatment. The position has now been reached in Hull that, for several years past, we have been able to inspect all elementary school children yearly and to treat all who accept the offer of treatment. A very good case can be made out for extending the benefits of the dental scheme to pupils in the secondary type of school and this can now be done without prejudice to the interests of the elementary children. Under existing conditions the elementary school child who proceeds to a secondary school at the age of eleven years ceases to participate in the benefits of the routine dental inspection and treatment which were provided while he attended the elementary school.

29. The question of the response to routine dental inspection and treatment has been dealt with in several previous reports of the School Medical Officer. About nine years ago systematic efforts were commenced with the object of reducing the number of " casual " cases with the result that to-day the number of these

ases treated in Hull is amongst the lowest in the country. The degree of efficiency f a school dental service depends upon the establishment of a high rate of cceptance of routine treatment. The more complete that acceptance of routine reatment becomes the less need there is for the treatment of casuals. In Hull pproximately 57 per cent. of those found at routine inspection to require treat- nent actually received treatment at the clinics. It is to be regretted that many arents after acceptance of clinic treatment fail, without adequate reason, to nsure that their children keep the appointments for treatment. In the Annual eport of the Medical Officer of the Board of Education the percentage of children equiring treatment and who have such treatment carried out, presumably by School ental Officers, varies from 59·9 in County Boroughs to 78·3 in London. Un- ortunately these figures cannot be used as a basis for comparison in the various reas because casual cases in which the acceptance rate is 100 per cent. are not nown separately from routine cases.

It is important to bear these considerations in mind when assessing the lue of dental statistics and there is justification for the opinion that the sponse in Hull to routine dental inspection and treatment is as good as the erage in the country. The response, however, is very far from being as good it should be after twenty-two years of dental inspection in the city. It is to feared that there is a considerable section of the population which is impervious any argument, except the argument of pain, in relation to dental treatment. f the thousands of children whose parents yearly indicate that they will arrange r treatment by their own dentist, only a very small percentage indeed ever sit a dentist, and when they do, it is almost invariably with a view to relieving othache, and not with the object of receiving complete conservative treatment. me parents accept clinic treatment one year and refuse it the next. It seemed obable that the investigation of this type of case might prove specially useful om the point of view of remedying any faults in our system and those who are terested will find a report of a small scale enquiry in an Appendix, page 309.

Orthopaedic and Postural Defects.

30. Certain particulars of the treatment of these defects will be found in ble IV, page 292. The statement, however, is very incomplete, and, therefore, lditional details are given below. Work of a similar character is undertaken at e Park Avenue Special School and is referred to on page 280.

It should be noted with regard to the appended tables that, as the Central rthopaedic Clinic is under the administrative control of the Education Com- ittee, statistics relating to all categories of patients are presented here. On the her hand, as the East Hull Orthopaedic Clinic is administered by the Health mmittee, statistics relating only to school children are given.

Central Orthopædic Clinic, 1935.

(*A*) *Inspections and Re-inspections by Orthopædic Surgeons.*

Type of Case.	COMMITTEE RESPONSIBLE.											
	Education.		M. & C.W.		Tuberculosis.		Health.		Children's Care.		Pub. Assistance.	
	New Cases.	Attend.	New Cases.	Attend.	New Cases.	Attend.	New Cases.	Attend.	New Cases.	Attend.	New Cases.	Attend.
Deformities—												
Rickets	4	52	8	32	—	—	1	1	—	—	—	—
Spinal Curvature ...	8	50	—	12	1	1	1	8	—	—	—	3
Infantile Paralysis	12	142	4	28	—	3	2	30	—	—	2	15
Other Forms ...	69	322	31	150	2	10	5	11	1	1	18	51
Tuberculosis—												
Spine	1	5	—	—	2	7	—	—	—	—	—	—
Hip	2	7	—	1	1	3	—	—	—	—	—	2
Other Bones & Joints	1	13	—	2		12	—	—	—	—	—	—
Totals ...	97	591	46	225	6	36	9	50	1	1	20	71

Total new cases—179. Total attendances for inspection—974.

(*B*) *Treatments Given.*

Form of Treatment.	COMMITTEE RESPONSIBLE.					
	Education.	M. & C.W.	Tuberculosis.	Health.	Children's Care.	Pub. Assistance.
Massage	2291	334	11	87	—	122
Electrical	246	2	1	15	—	97
Remedial Exercises ...	3503	334	7	94	—	122
Other	340	48	2	88	—	4
Totals ...	6380	718	21	284	—	345

Total number of treatments given—7,748.

East Hull Orthopædic Clinic, 1935.

(*A*) *Inspections and Re-inspections by Orthopædic Surgeons.*

Type of Case.	New Cases.	Attendances.
Deformities:—		
Rickets	—	—
Spinal Curvature	—	—
Infantile Paralysis	2	61
Other Forms	29	165
Tuberculosis:—		
Spine	—	—
Hip	—	1
Other Bones and Joints	2	4
Totals	33	231

(*B*) *Treatments Given.*

Form of Treatment.	
Massage	2060
Electrical	1232
Remedial Exercises	2901
Other	165
Total	6358

Heart Disease and Rheumatism.

31. This clinic is not a "treatment" clinic in the narrow sense of the word, t its activities nevertheless can be most appropriately referred to in this section.

The table printed below shows the amount of work done.

A special note on Heart Disease and Defect is printed in an Appendix, page 5.

Condition.	School Children.		Children under 5 years.		Totals.	
	Cases.	Attend.	Cases.	Attend.	Cases.	Attend.
Rheumatic Pains or Arthritis –						
(*a*) with heart affection ...	13	80	—	—	13	80
(*b*) without heart affection	15	73	1	1	16	74
Rheumatic Chorea –						
(*a*) with heart affection	2	15	—	—	2	15
(*b*) without heart affection	6	22	—	—	6	22
Rheumatic Carditis without (1) or (2) above ...	2	16	—	—	2	16
Congenital Heart Disease	12	115	9	20	21	135
Functional Heart Disorder	24	54	4	5	28	59
No Rheumatism or Heart Disease or Disorder...	32	55	1	3	33	58
Totals	106	430	15	29	121	459

Tuberculosis.

32. Education for forty to sixty children undergoing resident treatment is ovided at Cottingham Sanatorium. Children suffering from quiescent bone or nt tuberculosis are admitted to the Park Avenue School and the Open Air hool makes provision for a number of quiescent pulmonary and other types of e. No infectious cases attend these schools.

Treatment by Artificial Light.

33. This type of treatment is provided under the interavailability scheme by Maternity and Child Welfare Department. Little use was made of the ilities during the year.

Condition.	Number	Lamp.	Result.	
Debility	5	M.V.	Improved	7
Skin Diseases	3	M.V.	Not improved ..	2
Other	5	M.V.	Cancelled	1

M.V. Mercury Vapour.

The usual complete course involved twelve treatments. Several children had eat courses. Although the Mercury Vapour Lamp was used in each case other nps were occasionally used, in addition, for short courses.

VIII.—INFECTIOUS DISEASE.

34. The incidence of the more important diseases is shown below.

Incidence of Infectious Diseases.

Disease.	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Total 1935.	Total 1934.
Scarlet Fever	98	74	89	206	467	458
Diphtheria	209	102	83	174	568	648
Typhoid Fever	—	—	—	—	—	2
Poliomyelitis	—	—	—	—	—	1
Cerebro-Spinal Fever ...	2	1	1	1	5	3
Encephalitis Lethargica	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—
Chickenpox	458	462	300	266	1486	1116

Figures for the non-notifiable infectious diseases are not given because, although much information is available, it is not complete or entirely reliable. There was a fairly large epidemic of German Measles towards the end of the year.

35. Diphtheria of a very serious type has been prevalent in Hull for the last few years and many deaths have occurred in consequence. It is gratifying to note, however, that the number of cases fell from 887 in 1934 to 648 in 1935, and that the number of deaths decreased from 38 to 9.

36. Efforts to deal with the diphtheria problem by means of Schick testing and immunisation have continued throughout the year. The response to the effort can only be described as very disappointing, and taking into account the number of school entrants in one year the figures hold out no prospect of securing immunity in more than a mere fraction of the school population.

	Schick Tested.			Immunised.	Re-Tested.			Re-Immunised.
	No.	Negative.	Positive.		No.	Negative.	Positive.	
Clinics	1147	541	558	597 (20 without test)	418	362	18	18
Schools	1088	188	867	888 (24 do.)	251	240	9	—
Children's Homes ...	25	24	1	12 (11 do.)	9	9	—	—
	2260	753	1426	1497 (55 do.)	678	611	27	18

37. Certificates in accordance with the Education Code were issued in respect of four departments in which the abnormally low attendance (less than 60 per cent.) was reasonably attributable to the prevalence of infectious disease. The total number of weeks during which the low attendance prevailed in the four departments was four and the disease concerned was Measles.

Mortality Among School Children.

38. The table presented below shows the causes of death in children between he ages of five and fourteen years, *i.e.*, children who were eligible by age for ttendance at an elementary school at the date of death. Children aged fourteen ears, but exempt by age, are not included.

Causes of Death, 1935.

Disease or other Cause.		Number.	Percentage of Deaths from all Causes.	
Common Infectious Diseases.	Typhoid Fever	1	1·1	19·0
	Measles	3	3·4	
	Scarlet Fever	2	2·2	
	Whooping Cough	2	2·2	
	Diphtheria	9	10·1	
Cerebro-Spinal Fever		2	2·2	2·2
Tuberculosis	Pulmonary Tuberculosis	5	5·6	17·9
	Tuberculous Meningitis	6	6·7	
	Other Tuberculous Diseases	5	5·6	
Syphilis		2	2·2	2·2
Cancer, Malignant Disease		2	2·2	2·2
Diabetes		1	1·1	1·1
Heart Disease		8	9·0	9·0
Respiratory Diseases.	Broncho-Pneumonia	7	7·9	12·4
	Pneumonia (Other forms)	3	3·4	
	Other Respiratory Diseases	1	1·1	
Peptic Ulcer		1	1·1	1·1
Diarrhoea		1	1·1	1·1
Appendicitis		4	4·5	4·5
Digestive Diseases		2	2·2	2·2
Acute and Chronic Nephritis		2	2·2	2·2
Violence.	Drowning	1	1·1	12·3
	Other Violence	10	11·2	
Other Causes		9	10·1	10·1
Total		89		

It is of interest to note that the number of deaths in each year from 1929 to 935 has been 155, 118, 140, 159, 141, 117 and 89. The fall in 1935 is almost ntirely explained by the decrease in deaths due to diphtheria.

IX.—OPEN AIR EDUCATION.

39. Apart from the Open Air School to which reference is made on page 31, ere is no established provision for open air education, for example, in playground asses, school journeys and school camps. In 1935, however, a great deal of tention was given by the Education Committee to the question of school camps nd camp schools and there is a likelihood that during 1936 some definite steps ill be taken by the Committee to initiate activities of this type.

40. In 1935, on the initiative of the Lord Mayor, a voluntary fund was raised celebration of the late King's Jubilee, with the object of sending children to camps.

Although the fund was a voluntary one, the scheme was warmly supported by the Committee. The administration of the scheme was undertaken by a committee composed of members of the Education Committee, teachers and officials.

Mr. George Chipperfield, the secretary of the special voluntary fund committee, has supplied the following short note.

"HOLIDAY CAMPS, 1935.

During the Summer four camps on the East Coast of Yorkshire were occupied by Hull children. The first party of children left Hull on the 29th June, and the last two camps were vacated on the 28th and 30th September, respectively.

Members of the St. John Ambulance Brigade were in attendance at the camps and rendered valuable service.

The following figures give particulars of the attendance at the camps used.

Camps.	Period Occupied.	Children in Residence.	Teaching Staff in Charge.
Cowden ...	10 weeks	1599	90
Rolston	11 ,,	869	60
Kilnsea	11 ,,	1291	79
Mappleton ...	2 ,,	370	21
Totals ...	34 weeks	4129	250

It only remains to be recorded that on the whole the weather was excellent throughout the camp period and the children enjoyed their holiday in such a manner that it will probably remain a happy memory throughout their lives."

X. PHYSICAL TRAINING.

41. A report on this work compiled by the Organiser of Physical Training is printed in an Appendix, page 313. The school medical service in Hull, as elsewhere, welcomes the signs of a wider appreciation of the importance of this educational activity.

XI. PROVISION OF MEALS.

42. The School Medical Department maintains a close interest in the general arrangements for the provision of meals. During the year there was one experiment in the menus which is of special general interest. Boiled fish was served in the menu for Friday. The reception on the part of the children showed that fish cooked in this manner was not universally popular. It should be stated that the fish was excellent in quality and well cooked. It appears that in Hull many children do not like boiled fish ; they like only fried fish. They prefer boiled fish,

however to soup as an alternative. After a trial lasting about a year, it was decided early in 1936 to continue the use of boiled fish, but to add to the sauce served with the fish certain flavouring agents to make the meal more appetising to the children.

Meals are served in twenty-five centres. Some interesting information is given in the tables below.

Provision of Meals, 1935.

Total meals supplied Dinners, 1,011,689 ; Milk, 256,165.

Month.	Largest number of meals in one week.		Largest number of children fed in one week.	
	Dinners.	Milk.	Dinners.	Milk.
January	21808	6006	3911	1079
February	21684	6176	3883	1089
March	21776	6014	3905	1066
April ...	21215	5871	3834	1039
May ...	21195	5686	3856	1005
June ...	21359	5128	3869	1071
July	21574	5375	3888	976
August	17909	4385	3657	844
September ...	20254	4664	3658	833
October	20968	1850	3782	855
November	20285	1582	3635	824
December	20919	4839	3785	939

Provision of Meals, 1926 1935.

Year.	Total Dinners supplied.
1926	517624
1927	645842
1928	751731
1929	694833
1930	651931
1931	584192
1932	866195
1933	982268
1934	955766
1935	1011689

A general survey relating to certain matters connected with the provision of meals will be found in an Appendix, page 295.

XII. CO-OPERATION OF PARENTS, TEACHERS, SCHOOL ATTENDANCE OFFICERS AND VOLUNTARY BODIES.

43. The co-operation of parents varies a great deal. It varies as regards the ype of school, the age of the child, the influence of the head teacher and the particular matter in which co-operation is sought. There can be no doubt that, n the whole, in Hull the parents do co-operate in a satisfactory manner. There s room for an improvement, however, in regard to the attitude towards routine dental treatment and attendance for minor ailments treatment during the periods when schools are closed and when the influence of teachers is not available.

44. Once again it is a pleasure to acknowledge with gratitude the willing co-operation and able assistance rendered by the teachers in the work of the school medical department.

45. The Superintendent School Officer and his staff have rendered most valuable assistance in many directions.

46. The table printed below summarises (at 31st December, 1935, by way of example) the reasons for absences extending over a period of three months or more. The table omits certified cases of mental deficiency which were of such low grade as to have necessitated notification to the Local Control Authority. It omits also children resident in institutions, such as the Cottingham Sanatorium, where education is provided.

Absence for 3 months or more (December, 1935).

	Children who have attended school.		Children who have not commenced attendance or are permanently excluded.	
	Boys.	Girls.	Boys.	Girls.
Heart Disease	5	3	1	3
Acute Rheumatism	3	3	1	—
Chorea	6	9	—	—
Active Tuberculosis (Pulmonary)	1	3	—	
Active Tuberculosis (Bones and Joints) ...	1	7	5	2
Other Active Tuberculosis		2	—	—
Eye Diseases	2	1	—	—
Respiratory Diseases	3	5	—	3
Ear Diseases	1	2	—	—
Infectious Diseases	5	4	—	—
Skin Diseases	4	7	—	—
Epilepsy	2	1	2	1
Anæmia and Debility	7	10	1	—
Accident	6	1	—	—
Orthopædic Crippling	3	6	1	8
Mental Deficiency	—	1	9	8
Other Diseases	11	12	4	4
Totals	60	77	24	29

47. Several voluntary bodies continue to render most valuable aid directly or indirectly in connection with the activities of the School Medical Department.

48. During 1935, the Hull Children's Clothing Fund distributed 2,327 pairs of boots and 2,327 pairs of stockings to children. In addition, 32 children were provided with various other articles of clothing and the parents of 50 other children were persuaded by the Committee of the Fund to provide suitable clothing for their children.

49. The National Society for the Prevention of Cruelty to Children lent their valuable aid in connection with cases of ordinary neglect, uncleanliness and failure to provide adequate medical treatment.

50. In connection with the orthopædic scheme the work has been very greatly helped by the financial assistance provided to parents in respect of the purchase of surgical apparatus such as special boots and irons. Such assistance amounted in cases of individual children to sums as high as several pounds. The following voluntary bodies assisted in this work.

Poor Bairns' Fund	50 cases.
Guild of Brave Poor Things	17 cases.
British Legion	1 case.

51. The Trustees of the W. W. Tasker Fund once again placed at the entire iscretion of the School Medical Department as regards selection of children a onsiderable sum of money to be utilised in sending children for holidays in the ountry. No less than 170 children were sent on holiday for periods ranging from wo to four weeks.

52. The activities in connection with the Lord Mayor's Jubilee Voluntary und have been referred to on page 273.

XIII.—BLIND, DEAF AND EPILEPTIC CHILDREN.

53. The methods of ascertainment and disposal of children who are defective ithin the meaning of Part V of the Education Act, 1921, have been dealt with ully in previous Reports.

The methods of ascertainment remain adequate. The methods of disposal emain inefficient in certain directions through the inadequacy of special school ccommodation. One of the results of the inadequacy of the special school ccommodation for educable mentally defective children is of very considerable nportance from the social aspect. Under the existing law, educable mentally efective children who never attend a Special School cannot be notified to the ocal Control Authority under the Mental Deficiency Acts. Therefore, much of he work devoted to ascertainment is wasted.

Figures relating to special groups of children are printed in Table III, pages 90 and 291. The children referred to in this table are resident in the city, or are aintained on the responsibility of the Education Committee at special schools utside the area, or are patients in institutions belonging to the Corporation.

) Ascertainment and Disposal.

Mentally Defective Children.

54. Formal examinations in connection with the possibility of mental defect ere undertaken in 151 cases and the findings are set out below.

MENTAL DEFICIENCY EXAMINATIONS.

Idiots—Notified to Local Control Authority	1
Imbeciles—Notified to Local Control Authority	12
Low Grade Feeble Minded—Notified to Local Control Authority	1
Feeble Minded—Suitable for Special School	52
Dull (including borderline cases)	76
Backward	9
Total	151

55. It is very important, in connection with the figures in Table III, to stress the fact that the figures do not by any means represent the number of mentally defective children within the area. The table omits the large number of children whose cases have been notified to the Local Control Authority on account of their being ineducable. It omits also, with the exception of a few cases shown as "at no school," all children under seven years of age who are mentally defective and also all children certified as feeble minded and now between the ages of 14 and 16 years who, because of the fact that no accommodation was available in a special school, passed out of the jurisdiction of the Education Authority on their leaving an ordinary elementary school.

56. No less than 91 children who have been certified as feeble minded and suitable for admission to a special school remain in attendance at elementary schools.

57. The total number of children notified to the Local Control Authority under the Mental Deficiency Acts was 57, of whom 39 had been in attendance at the special school. The number included 1 idiot, 17 imbeciles, and 39 feeble minded cases.

Tuberculous Children.

58. With practically no exception all the cases of tuberculosis included in Table III have been under the supervision of the Tuberculosis Department.

Children with Multiple Defects.

59. To avoid misunderstanding, it should be noted that the figures under this heading do not include all children suffering from a combination of serious defects, but only children suffering from combinations of certain defects specified by the Board of Education

(b) Special Schools.

Osborne Street School for the Deaf.

60. A summary of the position at this school which provides for day scholars only is shown below.

	Boys.	Girls.	Total.
Number on Registers at 31st December, 1935 ..	19	19	38
Number admitted during 1935	1	2	3
Number who left at 16 years	3	2	5

61. Some years ago a reference was made in the Report to the desirability of providing a school in more pleasant surroundings than the present one, which is situated in the centre of the city. The question was raised in the Committee at the end of 1935, and there is a prospect of a transfer to a school on the outskirts of the city during 1936.

Malton Street School for Mentally Defective Children.

62. The appended summary shows the position at this school at the end of the year.

	Boys.	Girls.	Total.
Number on Registers at 31st December, 1935 ...	74	76	150
Number admitted during 1935	19	23	42
Number permitted to leave before age 16 years ...	9	8	17
Number discharged at age 16 years	4	1	8
Number discharged as ineducable	6	3	9
Number left the City	—	1	4
Number left to ordinary school	—	1	1
Number left for other reasons	1	1	2

63. The fact that accommodation at this school is inadequate has been referred to in Annual Reports for several years, and particularly in the Report for 1934. The position remained unaltered during the year except that with the growth of housing estates on the outskirts of the city, the position becomes more aggravated as regards the difficulty of arranging for children to get to and from the school.

64. The Craft Classes which have been in existence for many years have been dispensed with.

Park Avenue School for Physically Defective Children.

65. This school now caters for non-resident children only.

Certain details relating to the work are printed below.

No. on Register, December, 1935 129 .... Boys 68 .... Girls 61

Disease	No. in Dec., 1934.	Admitted.	Discharged.	No. in Dec., 1935.
Infantile Paralysis (sequelae)	58	8	7	59
Talipes Equino Varus and Valgus ...	4	1	—	5
Rachitic Deformities	3	—	—	3
Tuberculosis of Spine, quiescent ...	6	4	1	9
Tuberculosis of Hip, do. ...	7	6	—	13
Tuberculosis of Knee, do. ...	4	4	2	6
Tuberculosis of Femur, do.	1	—	—	1
Tuberculosis of Ankle, do.	—	1	—	1
Ataxia	2	—	—	2
Congenital Hydrocephalus	1	1	—	2
Hemiplegia Spastic Paralysis Birth Palsy	16	2	5	13
Congenital Dislocation of Hip	1	—	—	1
Accidental Dislocation of Hip	1	—	—	1
Chronic Osteo-myelitis	4	1	1	4
Amputation—Foot	1	—	—	1
Amputation—Leg	1	—	1	—
Genu Valgum	1	1	2	—
Perthe's Disease	2	—	2	—
Myeloma—Hip	1	—	—	1
Amyotonia Congenita	1	—	—	1
Haemophilia	1	—	—	1
Spina Bifida	1	—	—	1
Congenital Deformities of Hands and Feet	1	—	1	—
Congenital Deformities of Hands and Arms	—	1	—	1
Paralysis—Arm	1	—	—	1
Separated Femoral Epiphysis	—	1	—	1
Infective Arthritis Knee Joint	—	1	—	1
Total	119	32	22	129

Surgical Apparatus supplied	95
Operations	9
Medical Inspections at the School	479
Treatments at the School :—	
Massage	6262
Electrical	5501
Remedial Exercises	12590
Plaster of Paris Splints and Jackets	73
Minor Ailments	4280
Plaster of Paris Splints made for Cottingham Sanatorium patients...	2
Plaster of Paris Splints made for children not on the School Register	11

DISCHARGES DURING THE YEAR.

Left on attaining 16 years	3
Left to Ordinary School	7
Left to other Institution	5
Allowed to leave on obtaining employment	2
Discharged—unable to derive further benefit	2
Left the City	3

66. During the year no provision for vocational training existed. At one time a certain amount of vocational training was given, but this was discontinued some years ago, owing to the fact that the number of children of suitable age had greatly diminished. With the increase in numbers resulting from the change to a non-resident school, a new demand for vocational instruction has been created, and it is gratifying to know that provision for such instruction will be made in 1936.

Classes for Partially Sighted Children.

67. The two classes continue their excellent work. For years past, it has been hoped that a third class would be established, but for various reasons this has not yet taken place. There is no doubt that the provision of a third class in the East Hull area would be a great improvement. The two existing classes are situated

n the central and northern districts of the city and the necessity of sending children f this type from East Hull to one of these classes is a matter which is not free rom anxiety in these days of crowded traffic.

As stated in previous Reports, it is to be feared that while the public are fully live to the position of the totally blind child or adult, the existence and needs f the partially sighted group are but little appreciated by the lay public.

Open Air School.

68. This school continues to do excellent work. On 31st December, 1935, the umber of children on the register was 306 and the conditions responsible for dmission were as follows.

Delicate (malnutrition, debility, etc.)	287
Pulmonary Tuberculosis (quiescent)	8
Non-Pulmonary Tuberculosis (quiescent)	6
Crippling	5
Total	306

During the year 129 children were discharged from the school—the great ajority on account of their having recovered.

A nurse is employed full-time at the school and as seen from the following ble, she is kept fully occupied.

Open Air School, 1935.

General re-inspections by medical officers	508
Inspections and re-inspections by Aural Surgeon	31
Baths	10301
Cleanliness inspections	3888
Weighing and measuring	5587
Number of treatments of minor ailments	8066
Number of treatments of orthopædic defects	765

69. The question of the extension of open air school facilities in the country nerally is receiving attention at the present time, and it is therefore appropriate make a few observations on the experience of open air school work in Hull ice the opening of the school five years ago.

Hull has one open air school with official accommodation for 270. In order make full use of the school, the number on the roll exceeds 300. Thus there is proximately one open air school place per 150 of the school population a proportionate provision which is among the largest in England. This fact is important. It is important because parents are by no means all eager to co-operate in an effort to help their child if this means sending the child to a special school. If the provision of open air school places is proportionately low, there is no difficulty in finding parents who will eagerly co-operate ; if the provision is greater, then it means that parents who are not so eager have to be dealt with. It is, therefore, useful to study the objections to open air schools which are put forward by parents who will not agree to admission of their children or who require persuasion to secure their agreement.

It is as well to make it clear that in Hull there is no difficulty in finding enough children to accept admission to the school. Nevertheless, when vacancies arise, it is found that a good deal of effort is spent—sometimes successfully—in attempting to secure the admission of children who would benefit greatly from a period in the school. In fact it is very often the case that the children who are most delicate are the very ones whose parents refuse consent ; a fact which suggests that, in some of these cases, the same attitude which prompts the refusal of consent is also responsible for the very fact that the child is so much in need of special treatment.

One difficulty met with is dependent on transport. In an area as large as Hull with one single school, many children have to travel a long way by bus or tram to the Open Air School. All of them have to walk about 600 yards up the private road to the school, and a fair number have to walk some distance between their homes and the point where they join the tram or bus. It can readily be understood that on wet days, the prospect of walking these distances, followed by an all-day stay in an unheated school, does cause some anxiety to parents of children who may be only poorly equipped to meet cold and wet weather. The problem of fog is fortunately not frequently met with in Hull. It should be noted that in making these observations regarding the transport difficulties raised by parents, there is no intention to imply that the open air school is not well situated. On the contrary, it can be said that the situation of the school is one of the best to be found anywhere inside the city boundary, and the very fact that it is necessary to approach it by means of a long private road indicates that there are all the advantages of an open air site. The fact that there is no heating in the bandstand type of classrooms, and that these rooms are open for a considerable part of their height, is probably an advantage for the larger portion of the year, but in the climate of Hull there are many days in the winter months when it would be useful if some more permanent and suitable protection than canvas screens were available. On account of this fact, it might be advisable to provide moveable glass windows in the large dining-assembly room where children could be concentrated in very inclement weather.

Certain objections raised by parents are based on educational matters. Many arents think, without any real foundation, that there is a wide gap in the educa ional efficiency in any special school as compared with that in an elementary chool. The educational curriculum in the open air school must of necessity iffer in certain respects from the elementary school curriculum and parents are till apt to judge the efficiency of education by consideration of a few subjects nly. Again, parents are very often prone to blame the school if their child is not good scholar; they forget that, even in these modern days, the innate capacity f the child is of importance and that in other cases the irregular school attendance f the "delicate" type of child before he enters the open air school means that has missed a thorough grounding in essential educational principles.

The view that admission to the open air school will expose the child to iberculosis infection is fairly frequently expressed. Here, again, there is no undation for this opinion no cases of infective tuberculosis attend the school. nfortunately, many employers are quoted as likely to refuse children discharged om the open air school because of the assumption that the children are tuberculous. e same employers, no doubt, engage boys and girls who have been on the waiting t for admission and, because they have not had the advantage of a period at the hool, are not in such good physical condition as the children who are rejected.

The matter of contributions towards the cost is sometimes raised by parents. e financial scale on which charges are based can be described fairly as very asonable, and it is difficult to accept this attitude of parents as justified in the case an individual child, when it is remembered that charges are made on a scale sis and many parents in a similar position do pay the cost assessed. A very large mber of children, of course, are admitted without any charge to the parents. is also interesting to reflect that parents in this group will often not grudge the st of bottles of medicine, although apparently they find it difficult to accept the er of a stay in the school which is calculated to do more real good than gallons medicine.

Once the child is in the school, we meet occasionally with requests for dis- arge. Here the reasons given cover most of those already cited as given prior admission, but several new ones are sometimes adduced. One reason given is it the child "does not like the school." When pressed to give the reasons why e child does not like the school the answers relate to almost all of the activities, example, the bathing, the meals and the rest period. Not infrequently, ficulties regarding paying the assessed contribution are found to be the real ason. Objections as to bathing are based on arguments ranging from modesty the state of cleanliness, heedless of the fact that the spray baths are not intended cleanliness purposes alone. Once again we find that the child whose physical ndition is bad is often the child whose parents bring forward requests for dis- arge—frequently after a few weeks attendance.

Lastly there is the small group of children who simply will not put in a reasonable attendance at school. It is very well recognised that the children at this type of school are delicate; it is perhaps not sufficiently appreciated that without reasonably regular attendance the Open Air School cannot carry out good work—medical or educational. It is not sound policy in this type of school to keep on the register children who do not make a reasonable attendance.

So much for the darker side of Open Air School work. In order that the reader may not gather any wrong ideas from the foregoing observations, it remains to be stated that the Open Air School in Hull is one of the most active agents in improving the health of the child population. The staff are enthusiasts, and it is impossible to praise their efforts too highly. Lastly, in spite of the existence of the unsatisfactory group of parents to whom reference has been made, it should not be forgotten that there is a very much larger group of parents who appreciate highly what is being done for the good of their children.

(*c*) The After Careers of Defective Children.

70. The table below is of some general interest. It should be clearly appreciated that it refers solely to such persons in the various categories as actually attended a special school in the city or were maintained by the Education Committee at special schools outside the city and are still under twenty-one years of age. Thus, for example, mentally defective persons who were, as children, of too low a grade to attend a special school are not included.

	Physically Defective Children.			Mentally Defective Children.			Blind Children.			Deaf Children.		
	B.	G.	T.	B.	G.	T.	B.	G.	T.	B.	G.	T.
1. Number who have left	75	84	159	129	143	272	4	3	7	18	5	23
2. Number who—												
(*a*) Have since died	2	1	3		3	3	1	–	1	–	–	–
(*b*) Are known to be incapable by reason of mental or physical defect of undertaking employment	9	12	21	54	51	105	–	–	–	2	–	2
(*c*) Are in attendance at an Institution for further education	3	2	5	–	1	1		–		–	–	–
(*d*) Are in any other Institution	3	8	11	17	20	37	–	1	1	–	–	–
(*e*) Are unemployed	4	10	14	21	12	33	1	–	1	3	1	4
(*f*) Are attending ordinary schools...	12	16	28	1		1	–	–	–	–	–	–
3. Number who are employed in—												
(*a*) Industrial or manual occupations	13	7	20	21	2	23	2	2	4	11	2	13
(*b*) Agricultural or rural occupations		–		4	–	4	–	–	–	–	–	–
(*c*) Domestic occupations, including those who are helping in the domestic work at home	–	18	18	–	44	44	–	–	–	–	2	2
(*d*) Commercial, professional or clerical work	8	3	11	1		1	–	–	–	–	–	–
(*e*) Blind alley or other precarious occupations	5	–	5	3	1	4	–	–	–	–	–	–
4. Number who have left the neighbourhood, or whose after careers have not been traced	16	7	23	7	9	16	–	–	–	2	–	2
5. Earnings—												
(*a*) Unpaid	2	10	12	2	21	26	–	–	–	–	2	2
(*b*) Under 10s. per week	6	7	13	11	21	32	–	–	–		–	–
(*c*) Between 10s. and £1 per week	13	9	22	11	2	16	2	1	3	7	1	8
(*d*) Between £1 and £2 per week	3	1	4	1		1	–	1	1	4	1	5
(*e*) Over £2 per week	–	–	–	–	–	–	–	–	–	–	–	–
(*f*) Unknown	2	1	3	1	–	1	–	–	–	–	–	–

i) Inspection and Treatment of Children attending Special Schools.

71. A summary of the work done in connection with the inspection and eatment of children attending special schools in the city is given below.

Inspections.

At Schools—

Routine Medical Inspections	106
Routine Dental Inspections	679
Aural Surgeon's Inspections	37

At Clinics—

	Cases.	Attendances.
General	344	843
Ophthalmic	61	85
Aural	14	34
Rheumatism and Heart	4	10
Orthopaedic	2	41
Dental	6	6

Treatments.

Minor Ailments	2580
Orthopaedic	40
Dental	386

The above figures do not include inspections and treatments carried out at e Park Avenue School and the Open Air School, as detailed in the sections relating these schools.

In forty-six cases spectacles were prescribed, and in forty-five cases, spectacles re obtained during the year.

V.—FULL TIME COURSES OF HIGHER EDUCATION FOR BLIND, DEAF, DEFECTIVE AND EPILEPTIC STUDENTS.

thods Adopted.

72. Each case suggested as being in need of, and likely to profit by, a course further training is carefully considered as to suitability and prospects of ployment after completion of training, and, if satisfactory, a decision is obtained om the Education Committee and the matter is submitted to the Board of lucation for approval.

No courses are maintained by the Authority.

Training Provided.

(1) *Blind Cases.*

73. Twenty-five cases have been under training during the year. In one case, a youth completed a three years' course of training in further education and training preparatory to a subsequent eighteen months' course in massage at the National Institute for the Blind. He failed, however, to gain the School Leaving Certificate required and the National Institute were not prepared to accept him for training. In another case, a man twenty-four years of age was recommended as suitable for training as a shorthand typist and is now taking a three years' course at the Royal Normal College for the Blind, London. All the remaining cases (23) were, in accordance with the scheme approved by the Board of Education, undertaking courses of training in the following occupations at the Hull and East Riding Institute for the Blind: basket-making (6), brush-making (10), cane furniture making (1), mat making (2), machine knitting (3), re-seating chairs (1).

(2) *Cases suffering from Other Defects.*

74. One cripple lad who had been admitted from the Public Assistance Children's Homes to the Lord Mayor Treloar's Cripples' Hospital, Alton, where he was maintained by the Education Authority for purposes of vocational training was discharged early in 1935 as unlikely to benefit from the training.

No other case was provided for during the year.

After Careers.

75. Of the twenty-three persons under training at the Hull and East Riding Institute, four completed training during the year, and were at once transferred to the workshops of the institute as journeymen.

XV. NURSERY SCHOOLS.

76. No Nursery School has been established in the city. On the other hand, nine classes officially described as " classes for children under five years of age," are in existence and the number of children on the register of these classes was 262 in December, 1935. Although, of course, these classes, situated in existing elementary schools, do not provide all the facilities obtainable in a specially designed nursery school, there is every evidence of the fact that the work done is of a highly beneficial character.

XVI. SECONDARY SCHOOLS AND OTHER INSTITUTIONS OF HIGHER EDUCATION.

77. The arrangements for medical inspection and treatment of scholars attending these schools remained unaltered in 1935. As stated elsewhere there is every prospect of the introduction of a comprehensive scheme of dental inspection and treatment during 1936.

78. Medical officers visited these schools to carry out routine medical spection on 159 occasions.

79. The following summary shows the extent to which clinic facilities were ilised by pupils attending these schools.

Inspections.

	Cases.	Attendances.
General	34	55
Ophthalmic	218	286
Aural	16	30
Rheumatism and Heart	6	17
Orthopaedic	7	29

Treatments.

Minor Ailments	158
Orthopaedic	639
Dental....	18

In 168 cases, spectacles were prescribed, and in 160 cases, spectacles were ained on ophthalmic clinic prescriptions during the year.

XVII.—PARENTS' PAYMENTS.

80. Inspection and treatment are provided free of charge to pupils attending nentary schools, except in the case of dental treatment, for which small fixed rges are made in accordance with the family income. In the case of pupils nding secondary schools, inspection is provided free; treatment is provided y in cases where the parents prove their financial inability to procure treatment n private agencies. Voluntary payments by means of contribution boxes are pted on behalf of any patient. In addition, every non-school case inspected treated at a school clinic is the subject of payment by the appropriate Comtee to the Education Committee. The table printed below shows the amounts ived under two headings; the amount paid by other Committees is not uded.

	1932.			1933.			1934.			1935.		
	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
ed dental charges	395	11	0	374	17	6	384	1	0	381	12	6
untary payments	13	16	11	10	17	2	9	15	9	8	8	7
Totals	£409	7	11	385	14	8	393	16	9	390	1	1

XVIII. HEALTH EDUCATION.

81. The Director of Education reports that there has been no important nge in the teaching and practice of hygiene in schools during the year.

82. As in former years, students attending the centres for the training of teachers in the city have visited clinics and special schools under the guidance of members of the medical staff.

XIX.—SPECIAL ENQUIRIES.

83. Some matters of special interest are dealt with in Appendices to this Report.

XX.—MISCELLANEOUS.

84. Six hundred and twelve children attending elementary schools were examined by the medical staff in connection with employment out of school hours. Forty-three teachers were examined, mostly in connection with absence from duty. Eight student teachers were examined and thirty candidates were examined in connection with the Local Government Officers' Superannuation Act. Eleven children were examined in regard to theatrical employment and thirty-nine were examined under the provisions of the Children and Young Persons Act, 1933.

85. One hundred examinations in First Aid of adult students attending the School for Fishermen were carried out.

XXI.—STATISTICAL TABLES.

ELEMENTARY SCHOOLS.

TABLE 1.

RETURN OF MEDICAL INSPECTIONS, 1ST JANUARY, 1935, TO 31ST DECEMBER, 1935.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :—	
Entrants	4,700
Second Age Group	4,215
Third Age Group	4,143
Total	13,058
Number of other Routine Inspections	None.
Grand Total	13,058

B.—OTHER INSPECTIONS.

Number of Special Inspections	18,234
Number of Re-inspections	35,982
Total	54,216

Figures in Table IB. and Table IIA. do not include Special Inspections undertaken in connection with the scheme for the supply of free milk.

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING UNCLEANLINESS AND DENTAL DISEASE).

Prescribed Groups :—	
Entrants	796
Second Age Group	675
Third Age Group	514
Total (Prescribed Groups)	1,985
Other Routine Inspections	None
Grand Total	1,985

TABLE II.

A—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1935.

Defect or Disease. (1)	Routine Inspections. No. of Defects. Requiring treatment. (2)	Routine Inspections. No. of Defects. Requiring to be kept under observation but not requiring treatment. (3)	Special Inspections. No. of Defects. Requiring treatment. (4)	Special Inspections. No. of Defects. Requiring to be kept under observation but not requiring treatment. (5)
(1) Ringworm Scalp	1	—	15	
(2) ,, Body		—	101	
(3) Scabies	9		519	
(4) Impetigo	22		2198	1
(5) Other Diseases (Non-Tuberculous)	19	1	3540	9
Total (Heads 1 to 5)	51	1	6703	10
(6) Blepharitis	23	1	381	
(7) Conjunctivitis	7		479	
(8) Keratitis			2	2
(9) Corneal Opacities	—	—	6	
(10) Other Conditions (excluding Defective Vision and Squint) ...	5	4	461	26
Total (Heads 6 to 10)... ...	35	5	1329	28
(11) Defective Vision (excluding Squint)	581	24	480	56
(12) Squint	86	12	214	2
(13) Defective Hearing	19	1	40	4
(14) Otitis Media	33	5	590	—
(15) Other Ear Diseases	25	1	308	3
(16) Chronic Tonsillitis only	100	151	158	2
(17) Adenoids only	75	6	33	—
(18) Chronic Tonsillitis and Adenoids	707	94	174	—
(19) Other Conditions...	35	15	689	18
Enlarged Cervical Glands (Non-Tuberculous)	1	10	58	3
Defective Speech	—	—	—	—
Heart Disease:				
(22) Organic	27	1	12	1
(23) Functional	17	19	1	3
(24) Anaemia	24	35	22	1
(25) Bronchitis...	19	137	39	14
(26) Other Non-Tuberculous Diseases	—	—	19	1
Pulmonary:—				
(27) Definite	1	2	3	2
(28) Suspected		2	2	32
Non-Pulmonary:—				
(29) Glands	3	—	7	—
(30) Bones and Joints	—	—	2	2
(31) Skin		—	2	—
(32) Other Forms	—	—	1	—
Total (Heads 29 to 32)	3	—	12	2
(33) Epilepsy	—	3	12	4
(34) Chorea	3	5	11	1
(35) Other Conditions	—	1	9	9
(36) Rickets	9	—	1	—
(37) Spinal Curvature	2	—	1	—
(38) Other Forms	88	13	28	5
Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ...	28	81	5066	213
Total...	1969	627	16014	420

CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Age groups.	Number of Children Inspected.	A (Excellent) No.	A (Excellent) %	B (Normal) No.	B (Normal) %	C (Slightly subnormal) No.	C (Slightly subnormal) %	D (Bad) No.	D (Bad) %
nts ...	4700	514	10·9	3282	69·8	858	18·3	46	1·0
d Age group	4215	460	10·9	2801	66·4	903	21·5	51	1·2
Age group	4143	846	20·5	2445	59·1	789	18·8	63	1·5
Routine Inspections									
Total ...	13058	1820	14·0	8528	65·3	2550	19·5	160	1·2

TABLE III.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA AT 31ST DECEMBER, 1935.

BLIND CHILDREN.

At Certified Schools for the Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
17	—	1	—	18

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind.	At Certified Schools for the Partially Blind.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
—	45	62	—	1	108

DEAF CHILDREN.

At Certified Schools for the Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
37	—	—	1	38

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf.	At Certified Schools for the Partially Deaf.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
—	—	27	—	—	27

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

At Certified Schools for Mentally Defective Children.	At Public Elementary Schools.	At Private Schools.	At Other Institutions.	At no School or Institution.	Total.
145	91*	2	—	17	255

*All these children have been certified as suitable for a Special School, but had not been admitted at 31st December, 1935.

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
7	—	—	9	16

TABLE III. *Continued.*

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA AT 31ST DECEMBER, 1935.

PHYSICALLY DEFECTIVE CHILDREN.

A. TUBERCULOUS CHILDREN.

I.—*Children Suffering from Pulmonary Tuberculosis (including pleura and intra thoracic glands).*

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
17	25		2	44

I.—*Children Suffering from Non Pulmonary Tuberculosis* (Tuberculosis of all sites other than those shown in (I) above).

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
47	50	5	13	115

B. DELICATE CHILDREN.

ren (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
291	852	1	13	1157

C. CRIPPLED CHILDREN.

hildren (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a gree of crippling sufficiently severe to interfere materially with a child's normal mode of life.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
115	139	3	10	267

D. CHILDREN WITH HEART DISEASE.

Children who are incapable by reason of such physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools.	At Public Elementary Schools.	At Other Institutions.	At no School or Institution.	Total.
—	32	1	5	38

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

Children suffering from any combination of the following types of defect:— Blindness (excluding partially sighted ldren), Deafness (excluding partially deaf children), Mental Defect (Feeble-minded), Epilepsy, Active Tuberculosis, ppling (as defined in the penultimate category of the Table), Heart Disease.

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
nd and Feeble-minded		—	1	1	2
ble-minded and Tuberculosis ...	1	—			1
ble-minded and Crippled	3		—	2	5
ble-minded and Heart	1				1
ptic and Crippled	2	—			2
rculosis and Heart	1			—	1

TABLE IV.

TREATMENT TABLES.

Group I.—Minor Ailments (excluding Uncleanliness).

Disease or Defect (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Skin—			
Ringworm—Scalp			
(i) X Ray Treatment	32	–	32
(ii) Other	17	1	18
Ringworm—Body	102	–	102
Scabies	564	12	576
Impetigo	2522	2	2524
Other Skin Disease	3539	1	3540
Minor Eye Defects— (External and other, but excluding cases falling in Group II)	1176	3	1179
Minor Ear Defects—	931	5	936
Miscellaneous— (*e.g.*, minor injuries, bruises, sores, chilblains, etc.) ...	4325	–	4325
Total	13208	24	13232

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

	Number of Defects dealt with.		
	Under the Authority's Scheme.	Otherwise.	Total.
Errors of Refraction (including Squint)	1956	17	1973
Other Defect or Disease of the Eyes (excluding those recorded in Group I.)	72	—	72
Total	2028	17	2045
Number of children for whom spectacles were—			
(*a*) Prescribed	1514	17	1531
(*b*) Obtained	1501	17	1518

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.													
Received Operative Treatment.												Received other forms of Treatment. (4)	Total number treated. (5)
Under the Authority's Scheme, in Clinic or Hospital. (1)				By Private Practitioner or Hospital apart from the Authority's Scheme. (2)				Total. (3)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
—	—	—	—	51	34	452	30	51	34	452	30	655	1222

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids. (iv) Other defects of the nose and throat.

Group IV.—Orthopaedic and Postural Defects.

	Under the Authority's Scheme. (1)			Otherwise. (2)			Total number treated.
	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	Residential treatment with education. (i)	Residential treatment without education. (ii)	Non-residential treatment at an orthopaedic clinic. (iii)	
Number of children treated	Nil.	Nil.	254	Nil.	26	Nil.	273

TABLE V.

Dental Inspection and Treatment.

(1) Number of Children inspected by the Dentists :—

(a) Routine Age Groups.

Age :	
3	10
4	447
5	5529
6	5020
7	5111
8	5591
9	5265
10	5513
11	5271
12	5111
13	4972
14	583
15	71

Total 48503

(b) Specials 58

(c) Total (Routine and Specials) 48561

(2) Number found to require treatment 29416

(3) Number actually treated 16883

(4) Attendances made by children for treatment 25446

(5) Half-days devoted to Inspection 396, Treatment *2666 — Total 3062

(6) Fillings Permanent Teeth 5062, Temporary Teeth 50 — Total 5112

(7) Extractions Permanent Teeth 5223, Temporary Teeth 23132 — Total 28355

(8) Administrations of general anaesthetics for extractions 786

(9) Other operations Permanent Teeth 2885, Temporary Teeth 2313 — Total 5198

* Includes 42 half-days devoted to administration of general anaesthetics.

The above figures refer to elementary school children only.

Details of other dental work are printed in Section VII, page 267.

TABLE VI.

Uncleanliness and Verminous Conditions.

(i) Average number of visits per School made during the year by the School Nurses and Assistant Visitors ... 16

(ii) Total number of examinations of children in Schools by School Nurses and Assistant Visitors.... 104762

(iii) Number of individual children found unclean 5717

(iv) Number of children cleansed under arrangements made by the Local Education Authority ... ... None.

(v) Number of cases in which legal proceedings were taken :—

(a) Under the Education Act, 1921 ... ... None.

(b) Under School Attendance Bye-laws ... ... None.

SECONDARY SCHOOLS.

TABLE I.

Return of Medical Inspections in Secondary Schools, 1st January, 1935, to 31st December, 1935.

A.—ROUTINE MEDICAL INSPECTIONS.

Age	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18+	Total.
Number inspected	2	22	6	17	39	62	87	479	457	571	710	595	166	57	22	3292

B.—OTHER INSPECTIONS.

Number of Special Inspections 59

Number of Re-inspections 572

Total 631

C.—PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Routine Medical Inspection to Require Treatment (excluding Uncleanliness and Dental Disease).

Detailed Inspections 297

TABLE 11.

A.—Return of Defects found by Medical Inspection in Secondary Schools in the Year ended 31st December, 1935.

	Defect or Disease. (1)	Routine Inspections. No. of Defects. Requiring treatment. (2)	Routine Inspections. No. of Defects. Requiring to be kept under observation but not requiring treatment. (3)	Special Inspections. No. of Defects. Requiring treatment. (4)	Special Inspections. No. of Defects. Requiring to be kept under observation but not requiring treatment. (5)
Skin	(1) Ringworm—Scalp	—	—	—	—
	(2) ,, Body	—	—	—	—
	(3) Scabies	—	—	—	—
	(4) Impetigo	1	—	3	—
	(5) Other Diseases (Non-Tuberculous)	1	—	2	—
	Total (Heads 1 to 5)	2	—	5	—
Eye	(6) Blepharitis	4	—	1	—
	(7) Conjunctivitis	—	—	2	—
	(8) Keratitis	—	—	—	—
	(9) Corneal Opacities	—	—	—	—
	(10) Other Conditions (excluding Defective Vision and Squint) ...	2	—	1	—
	Total (Heads 6 to 10)	6	—	4	—
	(11) Defective Vision (excluding Squint)	210	3	3	—
	(12) Squint	5	1	—	—
Ear	(13) Defective Hearing	3	—	—	1
	(14) Otitis Media	1	—	1	—
	(15) Other Ear Diseases	1	—	1	—
Nose and Throat	(16) Chronic Tonsillitis only	9	4	—	—
	(17) Adenoids only	3	—	—	—
	(18) Chronic Tonsillitis and Adenoids	13	1	—	—
	(19) Other Conditions...	8	—	5	—
	(20) Enlarged Cervical Glands (Non-Tuberculous)	—	—	—	—
	(21) Defective Speech	—	—	—	—
Heart and Circulation	Heart Disease:				
	(22) Organic	7	—	—	—
	(23) Functional	2	1	—	—
	(24) Anaemia	1	—	—	—
Lungs	(25) Bronchitis...	—	—	—	—
	(26) Other Non-Tuberculous Diseases	—	—	—	—
Tuberculosis	Pulmonary:—				
	(27) Definite...	—	—	—	—
	(28) Suspected	—	—	—	—
	Non-Pulmonary:—				
	(29) Glands	—	—	—	—
	(30) Bones and Joints	—	—	—	—
	(31) Skin	—	—	—	—
	(32) Other Forms	—	—	—	—
	Total (Heads 29 to 32)	—	—	—	—
Nervous System	(33) Epilepsy	—	—	—	—
	(34) Chorea	1	—	—	—
	(35) Other Conditions	—	—	—	—
Deformities	(36) Rickets	—	—	—	—
	(37) Spinal Curvature	—	—	—	—
	(38) Other Forms	18	1	—	1
	(39) Other Defects and Diseases (excluding Uncleanliness and Dental Diseases) ...	4	4	5	2
	Total	294	15	24	4

B.—Classification of the Nutrition of Secondary School Pupils Inspected during the Year.

Age.	Number Inspected.	A. (Excellent) No.	A. (Excellent) %	B. (Normal) No.	B. (Normal) %	C. (Slightly Subnormal) No.	C. (Slightly Subnormal) %	D. (Bad) No.	D. (Bad) %
4	2	—	—	2	100	—	—	—	—
5	22	3	13·6	17	77·2	2	9·1	—	—
6	6	—	—	5	83·3	1	16·7	—	—
7	17	1	5·9	14	82·4	2	11·8	—	—
8	39	8	20·5	25	64·1	6	15·4	—	—
9	62	15	24·2	38	61·3	9	14·5	—	—
10	87	23	26·4	46	52·9	18	20·7	—	—
11	479	90	18·8	300	62·6	85	17·8	4	0·8
12	457	112	24·5	283	61·9	55	12·0	7	1·5
13	571	141	24·7	383	67·1	47	8·2	—	—
14	710	193	27·2	472	66·4	44	6·3	1	0·1
15	595	153	25·7	399	67·0	43	7·3	—	—
16	166	66	39·7	90	54·2	10	6·0	—	—
17	57	22	38·6	33	57·9	2	3·5	—	—
18	22	11	50·0	11	50·0	—	—	—	—
Total	3292	838	25·5	2118	64·3	324	9·8	12	0·4

APPENDIX A.

(By J. Morrison, M.A., M.D., D.P.H.).

I. NUTRITION.

For the first time in the history of the School Medical Service in this country he Board of Education made an effort, during 1935, to secure statistical in-ormation regarding nutrition which would be more or less standardised throughout he country. The assessment of nutrition is not a matter which can be dealt with n a large scale by scientific measurement. In order to secure some degree of niformity throughout the country, the Board introduced the requirement that hildren who were examined as routine cases, or as special cases in reference to the rovision of free milk, should be classified under one of four headings.

(1) Nutrition excellent.

(2) Nutrition normal.

(3) Nutrition slightly subnormal.

(4) Nutrition bad.

It will be obvious that, even under this system, the personal factor of the xamining medical officer may influence classification, but, on the other hand, n an area like Hull with a number of medical officers engaged, it is probable that n the statistical figures the influence of the personal factor tends to be levelled ut and the figures can be considered as giving a reasonably accurate picture of e situation.

Statistics and observations relating to the two groups of cases are given elow.

) Children Inspected at Routine Age.

Table II B is reprinted here for convenience.

Age-groups.	Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
ntrants ...	4700	514	10·9	3282	69·8	858	18·3	46	1·0
cond Age group	4215	460	10·9	2801	66·1	903	21·5	51	1·2
ird Age-group	4143	846	20·5	2415	59·1	789	18·8	63	1·5
Total	13058	1820	14·0	8528	65·3	2550	19·5	160	1·2

These figures related to children, unselected except for age, in the ordinary school population. Perhaps the most interesting fact revealed by the figures is the comparatively large percentage of " excellent " nutrition cases in the Third Age (12 years) Group. The percentage is almost double that in the other age groups. It is also interesting to note that the percentage of " bad " nutrition cases is greatest in the Third Group, although the percentages here are all so small that it would be fallacious to draw any conclusions.

It is interesting to speculate on the causes of improved nutrition in the Third Group. It is not difficult to make several suggestions as to the causes, but perhaps the most important single factor concerned is the comparative freedom from infectious diseases enjoyed by the older children. By the time the elementary school child reaches the age of 12 years, he has passed through the period during which he suffers from infectious complaints, such as measles and whooping cough, with the consequent debility. One would also like to think that he has had time to derive benefit from the various agencies which now tend to improve the general health of children in attendance at our elementary schools.

(B) Children Inspected in reference to the Provision of Free Milk.

Statistics under this head are not altogether satisfactory, largely because of the fact that the requirement to assess nutrition in terms of the four categories did not come into force until 1935, whereas the inspections for purposes of the milk scheme began in 1934. Thus many children classed as " original inspections " for purposes of assessment had actually been receiving milk for about six months, so that for comparative statistical purposes there are no data as to the nutrition assessment before milk was granted in the first instance. Further, while the assessment of nutrition in the routine group is aided by the facts that the children are weighed and measured and also fully examined, in the " milk " group, as pointed out in last year's Report, the children can only be subjected to a quite superficial inspection. Lastly, there is no doubt that the fact that the medical officer has to decide on recommending milk tends to influence him, rightly, in the direction of giving the benefit of doubt to the child, with the statistical result that border line children are included in the subnormal group.

With these reservations we print two tables to show the nutrition assessment of milk scheme cases during the year.

ORIGINAL INSPECTIONS.

Age.	No. Inspected.	Excellent.	Normal.	Slightly subnormal.	Bad.
Under 5	42	4	28	10	
5	818	35	568	210	5
6	629	22	402	194	11
7	672	20	442	200	10
8	589	19	369	192	9
9	590	20	395	165	10
10	638	26	425	185	2
11	599	42	409	146	2
12	543	62	367	111	3
13	386	53	261	72	
14	54	10	36	7	1
15	3	1	1		1
Totals ...	5563	314	3703	1492	54
Percentage	... ...	5·6	66·6	26·8	1·0

SUBSEQUENT INSPECTIONS.

Age.	No. Inspected.	Excellent.	Normal.	Slightly subnormal.	Bad.
Under 5	6	1	4	1	—
5	218	5	144	68	1
6	349	4	210	133	2
7	363	5	236	117	5
8	347	7	211	127	2
9	392	9	252	128	3
10	369	6	244	116	3
11	294	9	195	88	2
12	329	16	208	105	
13	305	24	202	77	2
14	59	7	37	15	—
15	6	1	4	1	-
Totals	3637	94	1947	976	20
Percentage	. .	3·1	64·1	32·2	0·6

These statistics could be utilised to prove almost anything! When we bear in mind the reservations made above, it is perhaps as well to refrain from any attempt to draw conclusions. The fact is that nutrition is dependent on so many factors that it is futile to expect to find the influence of one factor—the provision of milk—demonstrated by figures relating to the superficial assessment twice a year of a large group of children which varies greatly in composition throughout the year. Reliable statistical information regarding the influence of milk diet can only be obtained by following up systematically over a long period a single group of children under controlled conditions. This has been done on several occasions elsewhere and it has been demonstrated conclusively that milk does form a most useful addition to the diet of the great majority of children. Therefore, although it is not possible to demonstrate the influence of a milk ration from the figures presented, there is no doubt that the individual children who receive milk derived benefit. It should, of course, be noted that no more elaborate statistics can be provided under the conditions of the existing scheme.

II.—PROVISION OF MILK SCHEME.

Milk is provided in schools either on payment by parents, or free to children selected by the medical staff from the group of children entitled, on financial grounds, to provision of meals. Some interesting information as to the working of the scheme is set out below.

(*a*) Milk on Payment.

It will suffice to give the position as at 29th March and 1st October, 1935. The figures relate to Elementary School children only. Figures relating to Secondary Schools and Special Schools are available, but the circumstances in which milk is supplied in these classes of school are not exactly comparable.

Elementary Schools.

Date.	No. on Roll.	Number receiving Milk on payment.	Percentage of roll.
29th March, 1935	48,486	30,724	63·4
1st October, 1935	47,248	27,788	58·8

The figures show a decline in the numbers availing themselves of the opportunity of cheaper milk. This decline after the initial enthusiasm was not unexpected.

(*b*) Milk Supplied Free of Cost.

The number of children receiving milk free on 29th March, 1935, was 853, and on 1st October, 1,034. Here, again, Secondary and Special Schools are not included. At the Open Air School, for example, the supply of milk is a routine measure, and in many cases it is supplied free.

Some figures relating to the medical selection of these cases are of interest.

Inspections were carried out in schools in May and in November when a total of 1,774 first inspections and of 4,975 other inspections were made. In addition, 1,630 first inspections and 221 other inspections were carried out in clinics of children who had either been missed at school inspections or who became eligible for free meals at various dates during the year. The total first inspections was thus 3,404, and other inspections 5,196—a grand total of 8,600 inspections. The results of these inspections is shown in a table.

Results of Inspections for Milk Scheme.

First Inspections.		Other Inspections.				
Recommended.	Not Recommended	Recommended for first time.	Continued.	Not Recommended.	Discontinued.	Recommended after Discontinuance.
960	2444	340	1238	3087	515	16

It is clear that with the varying composition of the group from week to week, there is not much point in giving percentages but, as a matter of interest, it will be noted that roughly 28·2 per cent. of first inspections were recommended for milk. From the comparatively large number in whose cases milk was discontinued after six or twelve months, it appears that the issue of milk did lead to an improvement, and apparently the improvement was maintained, as it was only considered necessary in sixteen cases to recommend milk again after discontinuance.

One surprising feature of the scheme was the failure of a very large number of children to attend at clinics for inspection with a view to deciding as to whether they should receive free milk. At the beginning of the scheme, special clinics after 4 p.m. were arranged, but comparatively few appointments were kept. The special clinics were therefore discontinued and children are asked to attend ordinary clinics. Even then many appointments are not kept and the children have to be examined at school.

Lastly, figures showing the number of dinner and milk meals and the number of individual children in receipt of such meals throughout the year are printed on page 275.

APPENDIX B.

An Investigation into Some of the Problems of Mental Deficiency.

(By H. M. Cohen, M.B., Ch.B., D.P.H.).

The investigation concerns the inter-relations of—

(1) Stanford-Binet and Performance Intelligence Quotients ;

(2) Estimates of Probable Vocational Success ;

(3) Otis Primary A Group Intelligence Test ;

(4) The Free Association Test as a measure of Intelligence, in a group of Mentally Defective Children.

The investigation was conducted amongst 62 children—28 boys and 34 girls—between the ages of twelve and fourteen years in attendance at the Malton Street Special School for Mentally Defective Children. Although no large scale experiment was possible, it was decided that if a number of smaller questions could be investigated results could be obtained even from this restricted group which might have scientific value ; and though no result was conclusive, yet each might be suggestive of further work of importance.

(1) *The Inter-Relations of Stanford-Binet and Performance Intelligence Quotients.*

Diagnosis of mental defect depends mainly, though not entirely, upon the use of the Stanford or Binet revisions of the Binet-Simon Intelligence Scale. This scale, as many investigations have shown, depends to a considerable extent on the verbal fluency of the child, and is probably over-weighted on the verbal side. It was decided to compare the Stanford-Binet Intelligence Quotient with a quotient obtained by a scale of performance tests. The tests used for the latter purpose were those arranged by Drever and Collins. The results are shown in Table I. The outstanding variation between the two scales occurred in the case of a girl with a Stanford-Binet I.Q. of 74 who was credited with an I.Q. of 120 in the Drever-Collins scale. This child did not suffer from any social defects and it was decided to transfer her to an ordinary class in the Elementary School. Another girl with a Stanford-Binet I.Q. of 62 scored 115 on the Drever-Collins scale, while one boy with a Stanford-Binet I.Q. of 68 was credited with an I.Q. of 119 in the Drever-Collins scale.

It will be noted that the mean in all groups is higher in the Drever-Collins scale than in the Stanford-Binet scale.

TABLE I.

Correlation between Stanford-Binet I.Q. and Drever-Collins I.Q.

BOYS					GIRLS.				
Stanford Binet I.Q.		Drever Collins I.Q.		r	Stanford Binet I.Q.		Drever Collins I.Q.		r
M.	S.D.	M.	S.D.		M.	S.D.	M.	S.D.	
60·5	4·96	71	15·65	0·54 0·087	61·5	5·96	70	18·85	0·52 0·083

BOYS AND GIRLS.				
Stanford Binet I.Q.		Drever Collins I.Q.		r
M.	S.D.	M.	S.D.	
61·05	5·42	72	17·5	0·51 0·065

(2) *Estimates of Probable Vocational Success.*

The relation to an estimate by the school staff of the probable adjustment of he children to after-school vocation with the two measures of intelligence was hen investigated.

The Head Teacher of the Malton Street School, who has had many years' experience of this type of child, and has been able to follow up the after-school history, kindly gave her assistance in this part of the investigation. She was asked o estimate the ability of the child to fend for himself, to succeed in keeping himself in a suitable job, and to adapt himself to some form of work after school. It might be called ability to earn a living. Her knowledge of his school work of various kinds and behaviour would be her main source of information, but his Stanford-Binet I.Q. was not to be taken into account as a deciding factor. She was asked to give to each child a letter grade, A, B, C, D, E, F or G, according to her estimate of his future possibilities. The following scheme was suggested as a tentative guide.

"A. Give a Grade A only to those who you think certain to be able to keep themselves, and make some sort of success of their lives.

B. Give a Grade B to those who you think have a reasonable chance of making good.

C. Give a Grade C to those who might make good in favourable circumstances, with an understanding employer, for example.

D. Give a Grade D to those who you think unlikely to be able to look after themselves without some guidance.

E. Give a Grade E to those who you think would require a good deal of supervision and help if they were to look after themselves.

F. Give a Grade F to those who you think would be better in an institution.

G. Give a Grade G to those who you are certain will not be able to look after themselves and who should definitely spend their lives in an institution."

The same group of 34 girls and 28 boys who had been given Drever-Collins Performance Tests were graded. No child was placed in the "A" category, while only three girls were placed in the " B " category. The remainder of the children fell into the " C," " D," " E " and " F " categories. The correlation ratio, η, was estimated with the Stanford-Binet I.Q. and the Drever-Collins I.Q.

TABLE II.

Correlation ratio η of estimation of after-school ability with Stanford-Binet I.Q.

BOYS.	GIRLS.	ALL.
$\eta = 0{\cdot}508 \pm 0{\cdot}09$.	$\eta = 0{\cdot}345 \pm 0{\cdot}10$.	$\eta = 0{\cdot}193 \pm 0{\cdot}08$.

TABLE III.

Correlation ratio of estimation of after-school ability with Drever-Collins I.Q.

BOYS.	GIRLS.	ALL.
$\eta = 0{\cdot}558 \pm 0{\cdot}08$.	$\eta = 0{\cdot}515 \pm 0{\cdot}08$.	$\eta = 0{\cdot}505 \pm 0{\cdot}065$.

It may be noted that the Head Teacher had no knowledge of the results of the Drever-Collins Performance Tests. There is thus a strong suggestion that this performance type of test gives a better criterion of a child's after-school performance than the more verbal Stanford-Binet Test.

(3) *The Value of a Group Intelligence Test in the Study of Feeble-Minded Children.*

The Otis Primary A Group Test was given to 23 boys and 31 girls of the group previously examined.

The correlation with the Stanford-Binet I.Q. was—

Boys .... $r = -0{\cdot}224 \pm 0{\cdot}13$.

Girls .... $r = -0{\cdot}225 \pm 0{\cdot}12$.

All ... $r = 0{\cdot}095 \pm 0{\cdot}09$.

The Test is meant for infants and the instructions were given orally in great detail. There were no directions for the children to read, and instructions for each test were given separately. Yet the correlations show that the test was of no value whatever.

(4) *The Free Association Test as a Measure of Intelligence.*

Rosanoff's word list was used because his words are all common words. A quiet room was chosen and no person, other than the experimenter and the child, was present. The latter sat near the recorder, but sufficiently far away so as not to see the stimulus list nor the reaction words as they were written down. The nature of the test was then explained to the child, who readily grasped the instructions to reply to each stimulus word with the first word that came to his mind. The child was then further told that only one word was required and not a phrase or sentence. A few preliminary stimulus words not in the list were used to illustrate what was required and as a rule this practice was sufficient to enable the child to grasp what was required throughout the test. The few exceptions are mentioned in the results. The stimulus words which did not cause any reaction were repeated at the end of the test.

A stop-watch was used and the reaction time for each word was noted alongside. As very few responses were elicited in less than a second it was not necessary to record in units less than a whole second. Reliable time measures were thus obtainable.

The responses obtained were classified according to the kind of relation which gave rise to the association. For example, when in reply to the word " thirsty " the word " dry " was given, this was classed as " Meaning." When " thirsty " was followed by " water " this was classed as " Habit." " Opposites " may be illustrated by the pairs " earth—sky," " girl—boy," and " woman—man."

" Good associations " were those where the response showed considerable insight into the use of the word, *e.g.*, " doctor—examine," " beautiful—wonderful." Some responses are, of course, difficult to classify, but the same examiner usually places the words in the same category.

The classes used were: Meaning, Habit, Opposite, Omission and Good Association. An omission was scored when, in two attempts, the child could think of no word response in one minute each time. Times were found to be of no value in the judgment of intelligence.

The composite score was compiled in the following manner. The class scores were divided by the nearest whole number to their Standard Deviation, and added or subtracted as their correlation with the Stanford-Binet scores was positive or negative.

Habit (H)	Subtract score, divided by 10.
Meaning (M)	Add score, divided by 4.
Good Associations (G.A.)	Add score, divided by 7.
Wrong Meaning (W.M.)	Add score, divided by 2.
Opposites (Opp.)	Add score, divided by 7.
Omissions (Om.)	Subtract score, divided by 5.

The composite score (A) was thus—

$$A = -\frac{H}{10} + \frac{M}{4} + \frac{G.A.}{7} + \frac{W.M.}{2} + \frac{Opp.}{7} - \frac{Om.}{5}$$

No distinction was made between boys and girls, though the correlations are slightly different and it might be worth while doing this if further data were obtained.

Results.

An inspection of the responses showed that there were no cases where the instructions had been misunderstood except in the records of two girls. On analysis one of these showed 38 repetitions, a number far greater than the next highest in this category—namely, 15. In the case of the other girl's responses there were 52 omissions. The next highest number in this category was 26. It was decided to discard these two papers for the purpose of the correlations as they would tend to obscure the interpretation. The responses of the remaining 32 girls and 28 boys were used.

The attempt to construct a test of intelligence based on the Free Association technique has met with some measure of success. A composite score based on the classification of associations has been found to correlate with Stanford-Binet I.Q. to the extent of $r = 0{\cdot}5 \pm 0{\cdot}065$ with age constant. This is sufficiently promising to warrant further work on similar lines.

I desire to thank the Head Teacher and her staff for their ready help and co-operation.

APPENDIX C.

From the Rheumatism and Heart Clinic (D. C. Muir, M.D., F.R.C.P., and J. W. Brown, M.D., M.R.C.P.).

A Note on Rheumatic Heart Disease and Congenital Heart Defect.

This clinic has continued to be well attended and much useful and important work has been done. The main activities of the clinic fall under two heads; the rheumatic cases, all of which are potential cases of heart disease of a permanent and crippling type, and the congenital heart cases in which varying structural abnormalities are present from birth which may or may not give rise to trouble. The recognition of these diverse types of cases is most important from the point of view of the child's welfare and future. The regular observation of the individual case is even more important, because it may prevent invalidism by the timely recognition of some developing complication. Parents appreciate the close personal interest in their children that the work of this clinic involves. The activities of this clinic have aroused considerable interest in many parts of the world and there have been constant enquiries for details of the work done. Whilst no work has been published regarding the rheumatic group, a great deal has been done with the congenital group and the results of this work have added to the knowledge of this rather neglected category.

The majority of the cases coming to the clinic fall into the rheumatic group. All types and complications of this disease have been seen during the year and much valuable data accumulated. It has been a matter of great surprise and interest to observe the frequency with which hearts gravely involved in the rheumatic infection recover with slight or no permanent damage if adequately treated by prolonged rest. The co-operation of the Municipal Hospitals in this matter has enabled many cases to be observed right through their illness and has been very valuable to patient and clinic alike. During the year we have been struck by the number of cases of valvular disease with no rheumatic history and yet of rheumatic type. The aortic valve has been the most often involved and the incidence of these cases and their possible etiological factors have been the subject of special investigation. The records of the clinic now contain 243 cases of rheumatic heart disease and 131 of congenital heart disease, *i.e.*, 374 cases of organic heart disease. At first glance these figures may appear disproportionate, but it should be realised that practically all the cases of congenital heart disease have been seen as their lesion is present when they enter school. A large number of rheumatic cases escape observation owing to the age incidence of their disease and for other reasons. The existence of so many cardiac cases in the young merits close attention to the preventive aspects.

The cyanotic group of congenital heart disease has been the subject of special study in the clinic. By far the greatest number of these cases (80 per cent.) fall into an entity designated as the Tetralogy of Fallot. The essential anatomical abnormality of the tetralogy is mal-development of the pulmonary tract associated with a large defect of the interventricular septum, and the aorta is so placed as to over-ride this defect and consequently unaerated blood is shunted into the aorta giving rise to the familiar cyanotic hue of these subjects. The sufferers from this complaint acquire an extraordinary degree of tolerance to their deficiency of oxygen, and survival is often to the second or third decade. We have on this account insisted in our published works that these children should be encouraged to make what attendance they can at school and at least learn to read and write in order that they may amuse themselves, and, in some cases, obtain sedentary work when past the school age.

Our series of 27 cases of the tetralogy is made up of 18 males and 9 females. Their age distribution is as follows :—

Under 5	5 males, 2 females (2 dead).
6–10	1 male, 3 females.
11–15	10 males, 3 females (2 dead).
Above 15	2 males, 1 female (1 dead).

We can give no explanation of the excess of male cases in our series. An analysis of our cases of congenital heart disease as a whole shows a marked excess of females over males and it will be remembered that in a note on 40 cases of isolated ventricular septal defect published in an appendix to the School Medical Report it was found that 25 of the cases were females and 15 were males.

As regards physical status and development, 17 of the cases are of normal height and weight when compared with children of similar age groups. Associated abnormalities have been rare in the series. Little's disease occurred in one ; gross mental defect in two ; two were mongols. It is often difficult to assess the degree of intelligence of these children because many of them have had little or no education and have been left to their own devices. The physical handicap does not necessarily involve a mental disability. Our general impression is that these children are at least as intelligent as their fellows, given the same opportunities Not a few of our cases who have attended school have acquitted themselves creditably.

None of the cases has been entirely symptomless, a feature in marked contrast to that obtaining in the acyanotic groups. The major complaint has been breathlessness on exertion. Some of the children are comparatively little troubled by this symptom, except that they find themselves unable to play as vigorously as their fellows. Others are incapable of any sustained exertion and lead a more or less vegetative existence. A few may be said simply to exist and pass their lives in bed or in a bath chair. Cases of this type have in our experience been comparatively rare, because either they have been too ill to attend the clinic, or such a state of severe invalidism has been reached only in adolescence or early adult life. The very existence of such cases is an argument in favour of giving the sufferers at least a chance to acquire some learning with a view to mitigating the effects of their disablement.

All of our cases have shown some degree of clinical cyanosis at their first examination. Cyanosis is described as minimal in 4 (14·8 per cent.). One of these cases at the age of nineteen has only the slightest degree of cyanosis and clubbing is proportionate ; cyanosis is at once deepened by exertion. He is unable to read or write and very much regrets this inability. It is difficult to procure teaching for subjects of his age. Of the remainder, cyanosis is moderate in 7 25·9 per cent.), and severe in 16 (59·2 per cent.). Thus the bulk of cases have readily recognisable cyanosis at the time of examination and the case with minimal cyanosis is rather rare. The time taken to develop extreme cyanosis varies with the individual case and no definite time limit can be given. The general course is undoubtedly downwards, but the large number surviving to early adult life, and even to the late twenties, warrants more consideration being paid to the welfare of these cases than is generally given. Dyspnœa on exertion occurred in 20 of the older cases, and was present at rest in 7. In younger children dyspnœa was provoked by feeding, crying, or by fits of temper. Paroxysmal attacks of dyspnœa without apparent exciting cause occurred in 10 of the cases and 8 of these had attacks of such severity that consciousness was lost and convulsions ensued. Convulsions are not the inevitable concomitant of these attacks. It is impossible to exclude epilepsy entirely, and three of the cases indubitably suffered from this. Hæmorrhages occurred several times in the series. A history of epistaxis was given 7 times, hæmoptysis in 3 and hæmatemesis in 2 cases. Hæmaturia occurred in one case.

In reviewing the histories of these cases it is surprising how well tolerated the infectious diseases of childhood appear to be. Measles and whooping cough have a major frequency and we followed one case through a severe attack of chorea. Scarlet fever would appear to be an infrequent but dangerous complication. One of the cases died of infective endocarditis subsequent to a clinically mild attack of scarlet fever. There seems to be a slightly increased liability to respiratory infection in these cases and a cough is common. We have observed no case with a cerebral abscess, but we have one case in which a convulsive attack left a residual hemiplegia. The cause of death in two cases was infective endocarditis; two cases died in an asphyxial attack, and one following a convulsion.

It has been possible to examine 21 of the cases radiologically. Their ages have varied between 6 weeks and 19 years. Examination has been critical in view of the published statements of other observers that the radiogram was of little value in the diagnosis of congenital heart disease. With this opinion we find ourselves in disagreement and we have come to the conclusion that there is a very definite and characteristic radiological picture in this abnormality. The essential components of this picture are a definite concavity of the pulmonary arc, an aorta deviated to the right, and a shape of the heart designated as a " cœur en sabot " with an upturned apex due to hypertrophy of the right ventricles. We have been able to confirm our radiological findings in four cases examined post mortem.

Electrocardiographic examination has been done in twenty of the cases. The invariable finding is right ventricular preponderance with rather tall complexes and a large P wave as a frequent further abnormality.

Our work has led us to believe that the Tetralogy is a well-defined entity capable of accurate diagnosis in life if all the resources of cardiological investigation are employed. We feel that the recognition of these cases is important in view of their relatively long survival, and the consequent implications as regards education, etc. The details of this work, together with a review of the literature, will shortly appear in " Archives of Disease in Childhood " as a continuation of the work already published from this clinic.

APPENDIX D.

Non-Acceptance of Dental Treatment.

(By D. Gibson, L.D.S.).

The Hull School Dental Service has been developed to offer adequate facilities for the inspection and treatment of all elementary school children.

The response to the offer of routine dental treatment during the five years, 1930–1934, is indicated in Table I.

TABLE I.

	1930	1931	1932	1933	1934
Percentage of cases requiring treatment, treated at Clinics ...	62·1	63·4	60·1	61·1	59·1

It is important to note that these figures relate to routine cases only, all special (*i.e.*, casual) cases having been expressly excluded.

The treatment rate is thus approximately 60 per cent. and it appears probable that this rate will remain fairly constant. The slight variation shown is not of much significance as many outside factors, such as epidemic disease, may influence the rate. It should be remembered that a number of cases which do not accept clinic treatment are treated by private dental surgeons, but this number is small. In the majority of these cases, urgent treatment only is obtained, and not complete treatment of all diseased teeth in the mouth.

It is found that the cases referred for dental treatment can be broadly classed in two main sections. The first section is composed of children whose parents are anxious to obtain dental treatment for their children, attach value to the appointments given and show an increasing appreciation of the various facilities offered at the dental clinics. The second section is composed of children whose parents are indifferent to the advantages of dental treatment, do not value the appointments and show little or no appreciation of the facilities available. The service is thus faced with an important problem in attempting to secure an improvement in the attitude of the parents in the latter section.

The result is shown in Table II of the last dental inspection of two school departments in the latter section. Notification of the need for dental treatment was sent to the parents of the 150 boys and 123 girls who were found to require treatment. The response to these notices, after the lapse of a reasonable period, is set out below.

TABLE II.

Result of Notice.	Senior Boys.	Senior Girls.
Accepted Clinic Treatment	63	44
Refused any treatment	6	36
Indicated intention of obtaining private treatment...	28	18
Ignored notice	53	25

Of the 88 cases in the " Refusal " and " Own Dentist " Groups it is important to note that 75 cases had accepted clinic treatment on at least one previous occasion, the attendances being variously distributed over a period from 1928 to 1934. An investigation was directed towards these 75 cases, the purpose being primarily to ascertain if there were any aspects in the administration of the dental scheme which might reasonably be considered responsible for these cases failing to continue acceptance of clinic treatment. The investigation was carried out by personal visits, and it was found possible actually to investigate 69 cases. Enquiry was made into the reasons for non-acceptance of treatment, and the explanations were recorded. It may appear that a small number of cases do not offer sufficient scope for an investigation of this nature. In fact, however, it was found that the explanations given were of such a widely representative character as to merit consideration. The explanations given are classified in Table III.

TABLE III.

	Nature of Explanation given.	Refusal Group.	Own Dentist Group.
SECTION A	I. Criticism of Previous Treatment owing to Pain	1	5
	II. Objection to the Nature of the Treatment proposed...	15	9
	III. Criticism of the Facilities of the Clinic ...	2	4
	IV. Nervousness of the child	7	6
	V. Illness of the child	1	1
SECTION B	No definite reason	6	12

Consideration of the records revealed the following interesting facts :—

(1) In no less than 13 cases, the decision as to whether treatment should be accepted or not was left entirely in the hands of the child. These cases show both indifference of the parent and admitted lack of control over the child.

(2) In Groups I, II and IV, 22 cases based their reason with direct reference to Fillings.

(3) At the time of investigation, of the " Own Dentist " Group no case had obtained any treatment from a private dental surgeon. This indicates that in most cases " Own Dentist " is returned merely as a means of evasion of treatment.

In twelve selected cases, in view of the reason given for non-acceptance, for example, where it appeared possible that the parent was under a misapprehension as to the nature of the proposed treatment, an explanatory letter together with a further offer of treatment was forwarded. It is significant that only three cases took advantage of this further offer.

Group I.

It is generally found that those cases which do not regularly accept routine treatment show evidence of oral neglect. These two factors result in an increase in the amount and extent of dental treatment required with which is associated a greater probability of the treatment being painful. Conversely, those cases which regularly accept routine treatment generally show a higher standard of oral cleanliness with a resulting limitation of the amount and extent of treatment and a smaller probability of the treatment being painful.

Many of the cases in this group refer to pain associated with fillings. In these cases, the extension of the use of local anæsthesia might be applied with advantage. The dental surgeon through the constant repetition of dental operations in his ordinary routine work may tend to overlook the feelings of the patient. The use of local anæsthesia in conservative treatment might be criticised on account of the extra time required. In many cases there would be a saving of time through quicker cavity preparation, with the added advantage of a cavity more scientifically prepared, resulting in a filling of a better quality and conservation of nervous energy expended by the dental surgeon.

Group II.

In these cases, the objections to the nature of the proposed treatment refer mainly to fillings and the choice of anæsthetic for extractions. The decision as to the nature of the treatment and the choice of anæsthetic must be left to the dental officer. It is difficult to understand the attitude of parents in refusing to accept the advice of those qualified to advise them, and it can only be attributed to ignorance.

Group III.

The criticism of the clinic facilities in these cases was a complaint of the length of time which was spent at the clinic when obtaining treatment. As a general rule patients who arrive at the clinic at the appointed time are dealt with promptly. In some cases delay does occur, but this is not the fault of the system. Some parents do not attach sufficient importance to the value of the appointments given to the children. Owing to the number of appointments which are either broken or not kept punctually, it is found necessary to arrange for more than one case to attend at a given time in order to ensure as far as possible that the dental officer's time is fully utilised. As it is not possible to treat more than one case at a time, it is inevitable that occasionally some delay should occur. No improvement in the present system can be effected until parents realise the necessity of keeping appointments and attending punctually at the appointed time.

Group IV.

It may be said that most patients approach a dental operation with some nervousness. All infants when first attending for dental treatment show nervousness, but as a result of regular visits to the dental clinic this nervousness diminishes. In the later years of school life it is found that the regular cases attend in a very "matter of fact" manner. There is no doubt that in many cases of so-called nervousness the parent does not use sufficient control or sympathy. In this connection, it is most important to note that of the 69 cases, in 13 cases the child made the decision not to attend the clinic for treatment. There is every justification for assuming that in these cases if the parents were able to exercise sufficient control to obtain the child's attendance at the clinic, the child would eventually lose all fear of dental treatment and become a regular and satisfactory patient.

Group V.

In one case in this group, the parents refused treatment as the family medical attendant advised them that the child was not fit to undergo treatment at the time. In the other case, the parents themselves decided that owing to a poor state of general health the child was not fit to undergo treatment. It is probable that in such a case as the latter, where frequently rampant caries and oral sepsis are found in association with poor health, dental treatment would lead to some improvement in the state of health.

General Conclusions.

In Group I six cases referring to the association of pain with previous clinic treatment may be considered as having some justification in not accepting further treatment. The extended use of local anæsthesia in conservative dentistry would probably secure improvement in such cases, and the parents themselves should co-operate by regular acceptance of treatment.

Excluding the cases in Groups I and V, there are left 61 cases in which the service cannot be held at fault and in which the parents themselves should be held responsible. They must be criticised :—

(1) For failing to have sufficient control over their children in that they allow their children's plea of nervousness, instead of obtaining their attendance at the clinic.

(2) For indifference to the advantages to their children of regular treatment as distinct from casual treatment for relief of pain. It should be noted that in Section B, consisting of 18 cases, no reason could be given for not accepting treatment.

(3) For refusing to accept expert advice as to what treatment is necessary and which anaesthetic should be administered.

(4) For not keeping appointments, and for failing to attend punctually at the appointed times.

APPENDIX E.

Report on Physical Training, 1935.

(By K. Meaden Baker, Organiser of Physical Training).

General.

During the year I have visited 113 departments, and have seen 442 teachers conducting lessons in Physical Training. The baths were visited 61 times during the swimming season, and 78 times during the winter season, when the baths are covered and utilised for physical training lessons. Fifty-three visits were paid to the playing fields, 33 to play centres and 40 to evening institutes.

The revised syllabus of Physical Training, issued by the Board of Education in 1934, is being taught with increasing effectiveness and many teachers have taken the opportunities, offered by the Committee's Classes, of securing guidance in the application of the new syllabus. All Infants' and Junior Departments have a daily lesson. In the Senior Departments the time varies considerably, the recognised minimum being 100 minutes per week.

Playing Fields.

The playing fields are steadily responding to the treatment by the Parks Department for their surface improvement. There is more grass, and the surface, generally, is level.

Although field lessons started late owing to a very cold and wet spring, the actual use of the fields has been greater. Thirty-nine departments organised their own sports day and many departments used the fields during evenings.

Swimming.

The needs of the school children who are eligible to attend the baths are met in three districts, but provision in East Hull is inadequate. A school bath in the neighbourhood of Maybury Road could be fully used.

The certificates awarded this year are—

Boys, 2,791, a decrease of 153 on last year's figures.

Girls, 2,209, a decrease of 14 on last year's figures.

The number of periods allotted to girls is 17, and to boys 23.

Evening Institutes.

The standard of work is steadily improving. Fresh impetus has been given on the women's side by the introduction of "Keep Fit" Classes. There are 15 of these attached to the various institutes. The average attendance is 30, the lowest 22, and the highest 51.

Classes for Teachers.

The following classes were held during the year.

Physical Training for Women Teachers of Stds. 5, 6, 7 ...	76 on register, Average Attendance 70·8.
"Keep Fit" Course to train Leaders	31 on register, Average Attendance 28.
Physical Training for Women Teachers of Stds. 1 and 2 ...	104 on register, Average Attendance 80·9.

Four lecture demonstrations were arranged for teachers and one for the students of the Training Colleges.

Play Centres.

There are seven winter play centres – open three evenings each week. The nightly average is 400. The great amount of material needed is partly supplied by gifts, and valuable assistance in the conduct of the centres is given by the students of the Hull Municipal Training College.

Three playgrounds were opened as play centres during the summer.

Sports Days.

The District and Final Sports Days were held as usual and 39 departments organised their own Sports Days. At the Yorkshire Schools' Sports the contingents of boys and girls from Hull were again the Yorkshire Champions.

Voluntary Games Associations.

The following Associations continue their very useful work :—

1. The Hull Schools' Football Association—Boys.
2. The Hull Schools' Rugby Association—Boys.
3. The Hull Schools' Cricket Association—Boys.
4. The Hull Schools' Sports Association—Boys and Girls.
5. The Hull Schools' Swimming Association—Boys and Girls.
6. The Hull Schools' Girls' Games Association—Girls.